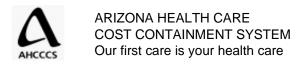
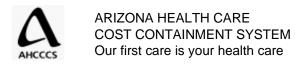


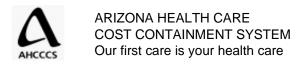
DECODIDEION	NON FAC	FAC RATE	DATE
DESCRIPTION	2009	2009	EFF DATE
MYELOGRAPHY, POSTERIOR FOSSA,			
RADIOLOGICAL SUPERVISION AND			
INTERPRETATION	\$195.28	\$195.28	10/1/2008
CISTERNIOGRAPHY POSITIVE			
· ·			
SUPERVISION AND INTERPRETATION	\$136.21	\$136.21	10/1/2008
DADIOLOGIO EVANINATIONI EVE FOR			
	\$27.66	¢07.66	10/1/2009
	\$27.00	\$∠1.00	10/1/2008
· ·			
FOUR VIEWS	\$30.72	\$30.72	10/1/2008
	#00.45	COO 45	40/4/0000
	\$39.15	\$39.15	10/1/2008
PER SIDE	\$34.52	\$34.52	10/1/2008
RADIOLOGIC EXAMINATION,		·	
MASTOIDS; COMPLETE, MINIMUM OF			
	\$53.35	\$53.35	10/1/2008
· ·			
· ·	¢47.62	\$47.62	10/1/2009
	φ41.02	Φ47.02	10/1/2008
BONES; LESS THAN THREE VIEWS	\$32.21	\$32.21	10/1/2008
RADIOLOGIC EXAMINATION, FACIAL			
BONES; COMPLETE, MINIMUM OF			
	\$43.74	\$43.74	10/1/2008
	¢21.46	¢21.46	10/1/2008
	φ31. 4 0	φ31.40	10/1/2008
*			
RADIOLOGICAL SUPERVISION AND	\$53.68	\$53.68	4/1/2006
RADIOLOGIC EXAMINATION; OPTIC			_
_	\$36.05	\$36.05	10/1/2008
	\$45.27	\$45.27	10/1/2008
	CISTERNOGRAPHY, POSITIVE CONTRAST, RADIOLOGICAL SUPERVISION AND INTERPRETATION RADIOLOGIC EXAMINATION, EYE, FOR DETECTION OF FOREIGN BODY RADIOLOGIC EXAMINATION, MANDIBLE; PARTIAL, LESS THAN FOUR VIEWS RADIOLOGIC EXAMINATION, MANDIBLE; COMPLETE, MINIMUM OF FOUR VIEWS RADIOLOGIC EXAMINATION, MASTOIDS; LESS THAN THREE VIEWS PER SIDE RADIOLOGIC EXAMINATION, MASTOIDS; COMPLETE, MINIMUM OF THREE VIEWS PER SIDE RADIOLOGIC EXAMINATION, INTERNAL AUDITORY MEATI, COMPLETE RADIOLOGIC EXAMINATION, FACIAL BONES; LESS THAN THREE VIEWS RADIOLOGIC EXAMINATION, FACIAL BONES; COMPLETE, MINIMUM OF THREE VIEWS RADIOLOGIC EXAMINATION, FACIAL BONES; COMPLETE, MINIMUM OF THREE VIEWS RADIOLOGIC EXAMINATION, NASAL BONES, COMPLETE, MINIMUM OF THREE VIEWS DACRYOCYSTOGRAPHY, NASOLACRIMAL DUCT, RADIOLOGICAL SUPERVISION AND	MYELOGRAPHY, POSTERIOR FOSSA, RADIOLOGICAL SUPERVISION AND INTERPRETATION \$195.28 CISTERNOGRAPHY, POSITIVE CONTRAST, RADIOLOGICAL SUPERVISION AND INTERPRETATION \$136.21 RADIOLOGIC EXAMINATION, EYE, FOR DETECTION OF FOREIGN BODY \$27.66 RADIOLOGIC EXAMINATION, MANDIBLE; PARTIAL, LESS THAN FOUR VIEWS \$30.72 RADIOLOGIC EXAMINATION, MANDIBLE; COMPLETE, MINIMUM OF FOUR VIEWS \$39.15 RADIOLOGIC EXAMINATION, MASTOIDS; LESS THAN THREE VIEWS PER SIDE \$34.52 RADIOLOGIC EXAMINATION, MASTOIDS; COMPLETE, MINIMUM OF THREE VIEWS PER SIDE \$53.35 RADIOLOGIC EXAMINATION, INTERNAL AUDITORY MEATI, COMPLETE \$47.62 RADIOLOGIC EXAMINATION, FACIAL BONES; LESS THAN THREE VIEWS \$32.21 RADIOLOGIC EXAMINATION, FACIAL BONES; LESS THAN THREE VIEWS \$32.21 RADIOLOGIC EXAMINATION, FACIAL BONES; COMPLETE, MINIMUM OF THREE VIEWS \$331.46 DACRYOCYSTOGRAPHY, NASOLACRIMAL DUCT, RADIOLOGIC EXAMINATION, NASAL BONES, COMPLETE, MINIMUM OF THREE VIEWS \$31.46 DACRYOCYSTOGRAPHY, NASOLACRIMAL DUCT, RADIOLOGIC EXAMINATION; OPTIC FORAMINA \$36.05 RADIOLOGIC EXAMINATION; OPTIC FORAMINA \$36.05	MYELOGRAPHY, POSTERIOR FOSSA, RADIOLOGICAL SUPERVISION AND INTERPRETATION \$195.28 \$195.28 CISTERNOGRAPHY, POSITIVE CONTRAST, RADIOLOGICAL SUPERVISION AND INTERPRETATION \$136.21 \$136.21 RADIOLOGIC EXAMINATION, EYE, FOR DETECTION OF FOREIGN BODY \$27.66 \$27.66 RADIOLOGIC EXAMINATION, MANDIBLE; PARTIAL, LESS THAN FOUR VIEWS \$30.72 \$30.72 RADIOLOGIC EXAMINATION, MANDIBLE; COMPLETE, MINIMUM OF FOUR VIEWS \$39.15 \$39.15 RADIOLOGIC EXAMINATION, MASTOIDS; LESS THAN THREE VIEWS PER SIDE \$34.52 \$34.52 RADIOLOGIC EXAMINATION, MASTOIDS; COMPLETE, MINIMUM OF THREE VIEWS PER SIDE \$53.35 \$53.35 RADIOLOGIC EXAMINATION, INTERNAL AUDITORY MEATI, COMPLETE \$47.62 \$47.62 RADIOLOGIC EXAMINATION, INTERNAL AUDITORY MEATI, COMPLETE \$47.62 \$47.62 RADIOLOGIC EXAMINATION, FACIAL BONES; LESS THAN THREE VIEWS \$32.21 \$32.21 RADIOLOGIC EXAMINATION, FACIAL BONES; COMPLETE, MINIMUM OF THREE VIEWS \$43.74 \$43.74 RADIOLOGIC EXAMINATION, NASAL BONES; COMPLETE, MINIMUM OF THREE VIEWS \$31.46 \$31.46 DACRYOCYSTOGRAPHY, NASOLACRIMAL DUCT, RADIOLOGIC EXAMINATION, NASAL BONES, COMPLETE, MINIMUM OF THREE VIEWS \$31.46 \$31.46 RADIOLOGIC EXAMINATION, OPTIC FORAMINA \$36.05 \$36.05 RADIOLOGIC EXAMINATION; OPTIC FORAMINA \$36.05 \$36.05



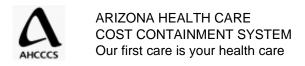
DESCRIPTION	NON FAC	FAC RATE	
DESCRIPTION		IFALKAIFI	
DEGGINI HON	RATE	2009	EFF DATE
	2009	2009	
RADIOLOGIC EXAMINATION, SINUSES,			
VIEWS	\$31.42	\$31.42	10/1/2008
RADIOLOGIC EXAMINATION SINUSES	* -	* -	
	\$41.43	\$41.43	10/1/2008
	Ψ+1.+0	ψ+1.+0	10/1/2000
	¢20 44	¢29 44	10/1/2008
	φ20.44	φ20. 44	10/1/2006
, ,	COC 40	COC 40	40/4/0000
	\$36.48	\$36.48	10/1/2008
· · · · · · · · · · · · · · · · · · ·			
· · · · · · · · · · · · · · · · · · ·			
_	\$50.65	\$50.65	10/1/2008
, ,			
	\$14.95	\$14.95	10/1/2008
PARTIAL EXAMINATION, LESS THAN			
FULL MOUTH	\$31.46	\$31.46	10/1/2008
RADIOLOGIC EXAMINATION, TEETH;			
COMPLETE, FULL MOUTH	\$46.76	\$46.76	10/1/2008
RADIOLOGIC EXAMINATION.	·		
	\$29.93	\$29.93	10/1/2008
•	+ =====	V =0.00	707.77
	\$47.15	\$47.15	10/1/2008
	Ψ-7.13	Ψ-7.13	10/1/2000
· ·	ድርር ዕር	¢ог оо	40/4/2000
	ф95.66	φ95.66	10/1/2008
	^	^	
` '		·	10/1/2008
			10/1/2008
	\$26.87	\$26.87	10/1/2008
·			
	\$26.87	\$26.87	10/1/2008
RADIOLOGIC EXAMINATION;			
PHARYNX OR LARYNX, INCLUDING			
FLUOROSCOPY AND/OR	\$72.46	\$72.46	10/1/2008
COMPLEX DYNAMIC PHARYNGEAL			
AND SPEECH EVALUATION BY CINE			
OR VIDEO RECORDING	\$108.74	\$108.74	10/1/2008
	RADIOLOGIC EXAMINATION, SINUSES, PARANASAL, COMPLETE, MINIMUM OF THREE VIEWS RADIOLOGIC EXAMINATION, SELLA TURCICA RADIOLOGIC EXAMINATION, SKULL; LESS THAN FOUR VIEWS RADIOLOGIC EXAMINATION, SKULL; COMPLETE, MINIMUM OF FOUR VIEWS RADIOLOGIC EXAMINATION, TEETH; SINGLE VIEW RADIOLOGIC EXAMINATION, TEETH; PARTIAL EXAMINATION, LESS THAN FULL MOUTH RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH; RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH; TEMPOROMANDIBULAR JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S) CEPHALOGRAM, ORTHODONTIC ORTHOPANTOGRAM RADIOLOGIC EXAMINATION; NECK, SOFT TISSUE RADIOLOGIC EXAMINATION; PHARYNX OR LARYNX, INCLUDING FLUOROSCOPY AND/OR COMPLEX DYNAMIC PHARYNGEAL AND SPEECH EVALUATION BY CINE	PARANASAL, LESS THAN THREE VIEWS RADIOLOGIC EXAMINATION, SINUSES, PARANASAL, COMPLETE, MINIMUM OF THREE VIEWS RADIOLOGIC EXAMINATION, SELLA TURCICA RADIOLOGIC EXAMINATION, SKULL; LESS THAN FOUR VIEWS RADIOLOGIC EXAMINATION, SKULL; COMPLETE, MINIMUM OF FOUR VIEWS RADIOLOGIC EXAMINATION, TEETH; SINGLE VIEW RADIOLOGIC EXAMINATION, TEETH; PARTIAL EXAMINATION, LESS THAN FULL MOUTH RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH; RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH; TEMPOROMANDIBULAR JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S) S384.57 CEPHALOGRAM, ORTHODONTIC ORTHOPANTOGRAM RADIOLOGIC EXAMINATION; PHARYNX OR LARYNX, INCLUDING FLUOROSCOPY AND/OR COMPLEX DYNAMIC PHARYNGEAL AND SPEECH EVALUATION BY CINE	PARANASAL, LESS THAN THREE VIEWS \$31.42 \$31.42 RADIOLOGIC EXAMINATION, SINUSES, PARANASAL, COMPLETE, MINIMUM OF THREE VIEWS \$41.43 \$41.43 RADIOLOGIC EXAMINATION, SELLA TURCICA \$28.44 \$28.44 RADIOLOGIC EXAMINATION, SKULL; LESS THAN FOUR VIEWS \$36.48 \$36.48 RADIOLOGIC EXAMINATION, SKULL; COMPLETE, MINIMUM OF FOUR VIEWS \$50.65 \$50.65 RADIOLOGIC EXAMINATION, TEETH; SINGLE VIEW \$14.95 \$14.95 RADIOLOGIC EXAMINATION, TEETH; PARTIAL EXAMINATION, LESS THAN FULL MOUTH \$31.46 \$31.46 RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH \$46.76 \$46.76 RADIOLOGIC EXAMINATION, TEETH; COMPLETE, FULL MOUTH \$46.76 \$46.76 RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH; \$29.93 \$29.93 RADIOLOGIC EXAMINATION, TEMPOROMANDIBULAR JOINT, OPEN AND CLOSED MOUTH; \$47.15 \$47.15 TEMPOROMANDIBULAR JOINT ARTHROGRAPHY, RADIOLOGICAL SUPERVISION AND \$95.88 \$95.88 MAGNETIC RESONANCE (EG, PROTON) IMAGING, TEMPOROMANDIBULAR JOINT(S) \$384.57 \$384.57 CEPHALOGRAM, ORTHODONTIC \$21.89 \$21.89 ORTHOPANTOGRAM \$26.87 \$26.87 RADIOLOGIC EXAMINATION; PHAPPOROMANDIBULAR JOINT(S) \$384.57 \$384.57 CEPHALOGRAM, ORTHODONTIC \$21.89 \$21.89 ORTHOPANTOGRAM \$26.87 \$26.87 RADIOLOGIC EXAMINATION; PHARYNX OR LARYNX, INCLUDING FHARYNX OR LARYNX, INCLUDING FHUOROSCOPY AND/OR \$72.46 \$72.46 COMPLEX DYNAMIC PHARYNGEAL AND SPEECH EVALUATION BY CINE



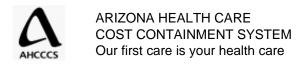
. 1000.100 7.1,0,	plicable FARS/DFARS apply.	NON EAC		
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	LARYNGOGRAPHY, CONTRAST, RADIOLOGICAL SUPERVISION AND			
70373	INTERPRETATION	\$87.40	\$87.40	10/1/2008
70380	RADIOLOGIC EXAMINATION, SALIVARY GLAND FOR CALCULUS	\$37.54	\$37.54	10/1/2008
70390	SIALOGRAPHY, RADIOLOGICAL SUPERVISION AND INTERPRETATION	\$99.17	\$99.17	10/1/2008
70450	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL	\$229.77	\$229.77	10/1/2008
70460	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITH CONTRAST MATERIAL(S)	\$292.30	\$292.30	10/1/2008
70470	COMPUTED TOMOGRAPHY, HEAD OR BRAIN; WITHOUT CONTRAST MATERIAL, FOLLOWED BY	\$354.64	\$354.64	10/1/2008
70480	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR	\$270.96	\$270.96	10/1/2008
70481	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR	\$346.44	\$346.44	10/1/2008
70482	COMPUTED TOMOGRAPHY, ORBIT, SELLA, OR POSTERIOR FOSSA OR OUTER, MIDDLE, OR	\$396.30	\$396.30	10/1/2008
70486	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT CONTRAST MATERIAL	\$256.01	\$256.01	10/1/2008
70487	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITH CONTRAST MATERIAL(S)	\$334.47	\$334.47	10/1/2008
	COMPUTED TOMOGRAPHY, MAXILLOFACIAL AREA; WITHOUT			
70488	CONTRAST MATERIAL, FOLLOWED BY	\$390.06	\$390.06	10/1/2008
70490	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITHOUT CONTRAST MATERIAL	\$261.78	\$261.78	10/1/2008
70491	COMPUTED TOMOGRAPHY, SOFT TISSUE NECK; WITH CONTRAST MATERIAL(S)	\$331.88	\$331.88	10/1/2008



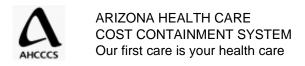
,,,	plicable FARS/DFARS apply.	NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE 2009	2009	EFF DATE
	COMPUTED TOMOGRAPHY, SOFT			
	TISSUE NECK; WITHOUT CONTRAST			
70492	MATERIAL FOLLOWED BY	\$390.02	\$390.02	10/1/2008
	COMPUTED TOMOGRAPHIC			
	ANGIOGRAPHY, HEAD, WITH			
70496	CONTRAST MATERIAL(S), INCLUDING NON	\$494.76	\$494.76	10/1/2008
70430	COMPUTED TOMOGRAPHIC	Ψ+3+.70	ψ+3+.70	10/1/2000
	ANGIOGRAPHY, NECK, WITH			
	CONTRAST MATERIAL(S), INCLUDING			
70498	NON	\$495.35	\$495.35	10/1/2008
	MAGNETIC RESONANCE (EG,			
70740	PROTON) IMAGING, ORBIT, FACE,	474 50	* 4 7 4 5 0	40/4/0000
70540	AND/OR NECK; WITHOUT CONTR MAGNETIC RESONANCE (EG,	\$474.56	\$474.56	10/1/2008
	PROTON) IMAGING, ORBIT, FACE,			
70542	AND NECK; WITH CONTRAST	\$478.13	\$478.13	10/1/2008
7 00 12	MAGNETIC RESONANCE (EG,	ψ17 0.110	ψ 17 G. 1G	10/1/2000
	PROTON) IMAGING, ORBIT, FACE,			
70543	AND NECK; WITHOUT	\$834.45	\$834.45	10/1/2008
	MAGNETIC RESONANCE			
	ANGIOGRAPHY, HEAD; WITHOUT	.		
70544	CONTRAST MATERIAL(S)	\$479.07	\$479.07	10/1/2008
	MAGNETIC RESONANCE ANGIOGRAPHY, HEAD; WITH			
70545	CONTRAST MATERIAL(S)	\$505.43	\$505.43	10/1/2008
7 00 10	MAGNETIC RESONANCE	φοσο: 10	φοσο. 10	10/1/2000
	ANGIOGRAPHY, HEAD; WITHOUT			
	CONTRAST MATERIAL(S), FOLLOWED			
70546	BY	\$801.23	\$801.23	10/1/2008
	MAGNETIC RESONANCE			
705.47	ANGIOGRAPHY, NECK; WITHOUT	# 470.00	# 470 OO	40/4/0000
70547	CONTRAST MATERIAL(S)	\$478.68	\$478.68	10/1/2008
	MAGNETIC RESONANCE ANGIOGRAPHY, NECK; WITH			
70548	CONTRAST MATERIAL(S)	\$509.71	\$509.71	10/1/2008
. 00 10	MAGNETIC RESONANCE	ψ505.71	ψ505.71	10/1/2000
	ANGIOGRAPHY, NECK; WITHOUT			
	CONTRAST MATERIAL(S), FOLLOWED			
70549	BY	\$801.03	\$801.03	10/1/2008



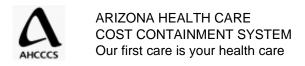
7.0007704. 7.10	plicable FARS/DFARS apply.	NON FAC		
PROC	DESCRIPTION	RATE 2009	FAC RATE 2009	EFF DATE
	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN			
70551	(INCLUDING BRAIN STEM); WITHOUT	\$485.94	\$485.94	10/1/2008
70552	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITH	\$ 557.77	¢ 567.77	40/4/2009
70552	(INCLUDING BRAIN STEM), WITH	\$567.77	\$567.77	10/1/2008
70553	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM); WITHOUT	\$850.54	\$850.54	10/1/2008
70554	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; INCLUDING TEST SELECTION AND	\$696.56	\$696.56	10/1/2008
	MAGNETIC RESONANCE IMAGING, BRAIN, FUNCTIONAL MRI; REQUIRING			
70555	PHYSICIAN OR PSYCHO	BR	BR	1/1/2007
70557	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	BR	BR	1/1/2004
70558	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	BR	BR	1/1/2004
70559	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BRAIN (INCLUDING BRAIN STEM AND SKULL	BR	BR	1/1/2004
71010	RADIOLOGIC EXAMINATION, CHEST; SINGLE VIEW, FRONTAL	\$25.73	\$25.73	10/1/2008
71015	RADIOLOGIC EXAMINATION, CHEST; STEREO, FRONTAL	\$30.36	\$30.36	10/1/2008
71020	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL;	\$33.38	\$33.38	10/1/2008
71021	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL; WITH APICAL	\$41.07	\$41.07	10/1/2008
71022	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL; WITH OBLIQUE	\$45.70	\$45.70	10/1/2008



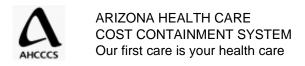
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	RADIOLOGIC EXAMINATION, CHEST, TWO VIEWS, FRONTAL AND LATERAL;			
71023	WITH FLUOROSCOPY RADIOLOGIC EXAMINATION, CHEST,	\$62.18	\$62.18	10/1/2008
	COMPLETE, MINIMUM OF FOUR			
71030	VIEWS;	\$47.23	\$47.23	10/1/2008
	RADIOLOGIC EXAMINATION, CHEST, COMPLETE, MINIMUM OF FOUR			
71034	VIEWS; WITH FLUOROSCOPY	\$90.50	\$90.50	10/1/2008
	RADIOLOGIC EXAMINATION, CHEST, SPECIAL VIEWS (EG, LATERAL			
71035	DECUBITUS, BUCKY	\$33.38	\$33.38	10/1/2008
	BRONCHOGRAPHY, UNILATERAL, RADIOLOGICAL SUPERVISION AND			
71040	INTERPRETATION	\$94.82	\$94.82	10/1/2008
	BRONCHOGRAPHY, BILATERAL, RADIOLOGICAL SUPERVISION AND	*	.	
71060	INTERPRETATION	\$137.70	\$137.70	10/1/2008
71090	INSERTION PACEMAKER, FLUOROSCOPY AND RADIOGRAPHY, RADIOLOGICAL SUPERVISION AND	\$96.78	\$96.78	4/1/2006
7 1090	RADIOLOGIC EXAMINATION, RIBS,	φ90.70	φ90.76	4/1/2000
71100	UNILATERAL; TWO VIEWS	\$33.38	\$33.38	10/1/2008
71101	RADIOLOGIC EXAMINATION, RIBS, UNILATERAL; INCLUDING POSTEROANTERIOR CHEST,	\$40.22	¢40.22	40/4/2009
71101	RADIOLOGIC EXAMINATION, RIBS,	\$40.33	\$40.33	10/1/2008
71110	BILATERAL; THREE VIEWS	\$43.00	\$43.00	10/1/2008
	RADIOLOGIC EXAMINATION, RIBS, BILATERAL; INCLUDING		4	
71111	POSTEROANTERIOR CHEST,	\$52.96	\$52.96	10/1/2007
71120	RADIOLOGIC EXAMINATION; STERNUM, MINIMUM OF TWO VIEWS	\$34.91	\$34.91	10/1/2008
	RADIOLOGIC EXAMINATION; STERNOCLAVICULAR JOINT OR	400.07	400.07	40/4/0000
71130	JOINTS, MINIMUM OF THREE VIEWS	\$38.37	\$38.37	10/1/2008
71250	COMPUTED TOMOGRAPHY, THORAX; WITHOUT CONTRAST MATERIAL	\$274.14	\$274.14	10/1/2008
71260	COMPUTED TOMOGRAPHY, THORAX; WITH CONTRAST MATERIAL(S)	\$346.08	\$346.08	10/1/2008
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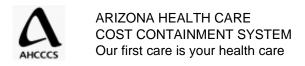
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
71270	COMPUTED TOMOGRAPHY, THORAX; WITHOUT CONTRAST MATERIAL, FOLLOWED BY CONTRAST	\$414.81	\$414.81	10/1/2008
	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, CHEST (NONCORONARY), WITH CONTRAST	·		
71275	MATERIAL(S) MAGNETIC RESONANCE (EG,	\$500.53	\$500.53	10/1/2008
71550	PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	\$416.11	\$416.11	10/1/2008
71551	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR EVALUATION OF HILAR AND	\$483.15	\$483.15	10/1/2008
	MAGNETIC RESONANCE (EG, PROTON) IMAGING, CHEST (EG, FOR	·	·	
71552	EVALUATION OF HILAR AND MAGNETIC RESONANCE ANGIOGRAPHY, CHEST (EXCLUDING	\$638.03	\$638.03	10/1/2008
71555	MYOCARDIUM), WITH OR WITHOUT RADIOLOGIC EXAMINATION, SPINE, ENTIRE, SURVEY STUDY,	\$487.62	\$487.62	10/1/2008
72010	ANTEROPOSTERIOR AND LATERAL RADIOLOGIC EXAMINATION, SPINE,	\$66.81	\$66.81	10/1/2008
72020	SINGLE VIEW, SPECIFY LEVEL RADIOLOGIC EXAMINATION, SPINE,	\$24.17	\$24.17	10/1/2008
72040	CERVICAL; TWO OR THREE VIEWS	\$36.84	\$36.84	10/1/2008
72050	RADIOLOGIC EXAMINATION, SPINE, CERVICAL; MINIMUM OF FOUR VIEWS RADIOLOGIC EXAMINATION, SPINE,	\$52.57	\$52.57	10/1/2008
72052	CERVICAL; COMPLETE, INCLUDING OBLIQUE AND	\$65.98	\$65.98	10/1/2008
72069	RADIOLOGIC EXAMINATION, SPINE, THORACOLUMBAR, STANDING (SCOLIOSIS)	\$33.82	\$33.82	10/1/2008
72070	RADIOLOGIC EXAMINATION, SPINE; THORACIC, TWO VIEWS	\$35.31	\$35.31	10/1/2008
72072	RADIOLOGIC EXAMINATION, SPINE; THORACIC, THREE VIEWS	\$39.50	\$39.50	10/1/2008
72074	RADIOLOGIC EXAMINATION, SPINE; THORACIC, MINIMUM OF FOUR VIEWS	\$46.76	\$46.76	10/1/2008



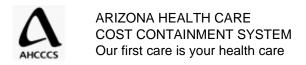
, .	plicable FARS/DFARS apply.	NON FAC		
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
1100	DECORN HOW	2009	2009	LII DAIL
	RADIOLOGIC EXAMINATION, SPINE;	2009		
72080	THORACOLUMBAR, TWO VIEWS	\$36.44	\$36.44	10/1/2008
72000	RADIOLOGIC EXAMINATION, SPINE;	φου. 11	ψου. 1 1	10/1/2000
	SCOLIOSIS STUDY, INCLUDING			
72090	SUPINE AND ERECT	\$45.70	\$45.70	10/1/2008
72030	RADIOLOGIC EXAMINATION, SPINE,	Ψ-3.70	ψ+3.70	10/1/2000
	LUMBOSACRAL; TWO OR THREE			
72100	VIEWS	\$38.76	\$38.76	10/1/2009
72100	RADIOLOGIC EXAMINATION, SPINE,	φ30.70	φ30.70	10/1/2008
70440	LUMBOSACRAL; MINIMUM OF FOUR	05440	054.40	40/4/0000
72110	VIEWS	\$54.10	\$54.10	10/1/2008
	RADIOLOGIC EXAMINATION, SPINE,			
	LUMBOSACRAL; COMPLETE,	^-	^-	
72114	INCLUDING BENDING VIEWS	\$70.18	\$70.18	10/1/2008
	RADIOLOGIC EXAMINATION, SPINE,			
	LUMBOSACRAL, BENDING VIEWS			
72120	ONLY, MINIMUM OF FOUR	\$48.64	\$48.64	10/1/2008
	COMPUTED TOMOGRAPHY,			
	CERVICAL SPINE; WITHOUT			
72125	CONTRAST MATERIAL	\$274.14	\$274.14	10/1/2008
	COMPUTED TOMOGRAPHY,			
	CERVICAL SPINE; WITH CONTRAST			
72126	MATERIAL	\$344.95	\$344.95	10/1/2008
	COMPUTED TOMOGRAPHY,			
	CERVICAL SPINE; WITHOUT			
72127	CONTRAST MATERIAL, FOLLOWED BY	\$389.00	\$389.00	10/1/2008
	COMPUTED TOMOGRAPHY,			
	THORACIC SPINE; WITHOUT			
72128	CONTRAST MATERIAL	\$274.14	\$274.14	10/1/2008
	COMPUTED TOMOGRAPHY,			
	THORACIC SPINE; WITH CONTRAST			
72129	MATERIAL	\$337.81	\$337.81	10/1/2008
	COMPUTED TOMOGRAPHY,			
	THORACIC SPINE; WITHOUT			
72130	CONTRAST MATERIAL, FOLLOWED BY	\$389.00	\$389.00	10/1/2008
	COMPUTED TOMOGRAPHY, LUMBAR			
	SPINE; WITHOUT CONTRAST			
72131	MATERIAL	\$274.14	\$274.14	10/1/2008
-		<u> </u>	+ · · · ·	
	COMPUTED TOMOGRAPHY, LUMBAR			
72132	SPINE; WITH CONTRAST MATERIAL	\$337.41	\$337.41	10/1/2008



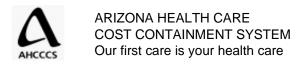
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
		2009		
	COMPUTED TOMOGRAPHY, LUMBAR			
	SPINE; WITHOUT CONTRAST			
72133	MATERIAL, FOLLOWED BY	\$389.00	\$389.00	10/1/2008
	MAGNETIC RESONANCE (EG,	***************************************	· · · · · · · · · · · · · · · · · · ·	
	PROTON) IMAGING, SPINAL CANAL			
72141	AND CONTENTS, CERVICAL;	\$482.56	\$482.56	10/1/2008
	MAGNETIC RESONANCE (EG,	*	*	
	PROTON) IMAGING, SPINAL CANAL			
72142	AND CONTENTS, CERVICAL;	\$574.52	\$574.52	10/1/2008
	MAGNETIC RESONANCE (EG,	*	*	
	PROTON) IMAGING, SPINAL CANAL			
72146	AND CONTENTS, THORACIC;	\$501.71	\$501.71	10/1/2008
-	MAGNETIC RESONANCE (EG,	*	*	
	PROTON) IMAGING, SPINAL CANAL			
72147	AND CONTENTS, THORACIC;	\$492.61	\$492.61	10/1/2008
	MAGNETIC RESONANCE (EG.	* 10=101	¥ 10=101	
	PROTON) IMAGING, SPINAL CANAL			
72148	AND CONTENTS, LUMBAR;	\$496.10	\$496.10	10/1/2008
	MAGNETIC RESONANCE (EG,	* 1001110	V 10 0110	
	PROTON) IMAGING, SPINAL CANAL			
72149	AND CONTENTS, LUMBAR;	\$567.97	\$567.97	10/1/2008
	MAGNETIC RESONANCE (EG,	φσσσ.	ψοσσ.	. 0, ., _ 00
	PROTON) IMAGING, SPINAL CANAL			
72156	AND CONTENTS, WITHOUT	\$859.32	\$859.32	10/1/2008
	MAGNETIC RESONANCE (EG,	-	4 00000	
	PROTON) IMAGING, SPINAL CANAL			
72157	AND CONTENTS, WITHOUT	\$851.48	\$851.48	10/1/2008
	MAGNETIC RESONANCE (EG,	·		
	PROTON) IMAGING, SPINAL CANAL			
72158	AND CONTENTS, WITHOUT	\$848.97	\$848.97	10/1/2008
	MAGNETIC RESONANCE	*	*	
	ANGIOGRAPHY, SPINAL CANAL AND			
72159	CONTENTS, WITH OR WITHOUT	\$617.40	\$617.40	10/1/2008
	RADIOLOGIC EXAMINATION, PELVIS;	********	Ţ C	
72170	ONE OR TWO VIEWS	\$27.66	\$27.66	10/1/2008
	RADIOLOGIC EXAMINATION, PELVIS;		V =1100	
	COMPLETE, MINIMUM OF THREE			
72190	VIEWS	\$39.11	\$39.11	10/1/2008
	COMPUTED TOMOGRAPHIC	,	,	1, 1, 200
	ANGIOGRAPHY, PELVIS, WITH			
	CONTRAST MATERIAL(S), INCLUDING			
72191	N	\$488.25	\$488.25	10/1/2008



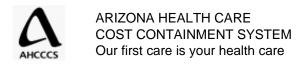
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PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
	Jacob High	2009	2009	2 572
	COMPUTED TOMOGRAPHY, PELVIS;			
72192	WITHOUT CONTRAST MATERIAL	\$269.00	\$269.00	10/1/2008
	COMPUTED TOMOGRAPHY, PELVIS;		·	
72193	WITH CONTRAST MATERIAL(S)	\$337.02	\$337.02	10/1/2008
	COMPUTED TOMOGRAPHY, PELVIS;		·	
	WITHOUT CONTRAST MATERIAL,			
72194	FOLLOWED BY CONTRAST	\$401.04	\$401.04	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, PELVIS; WITHOUT			
72195	CONTRAST MATERIAL(S)	\$481.97	\$481.97	10/1/2008
	MAGNETIC RESONANCE (EG,		·	
	PROTON) IMAGING, PELVIS; WITH			
72196	CONTRAST MATERIAL(S)	\$483.50	\$483.50	10/1/2008
	MAGNETIC RESONANCE (EG.	*	V 100100	
	PROTON) IMAGING, PELVIS; WITHOUT			
72197	CONTRAST MATERIAL(S),	\$841.91	\$841.91	10/1/2008
-	MAGNETIC RESONANCE	*	¥	
	ANGIOGRAPHY, PELVIS, WITH OR			
72198	WITHOUT CONTRAST MATERIAL(S)	\$530.97	\$530.97	10/1/2008
	RADIOLOGIC EXAMINATION,	*	, and a	
	SACROILIAC JOINTS; LESS THAN			
72200	THREE VIEWS	\$29.54	\$29.54	10/1/2008
	RADIOLOGIC EXAMINATION,	,	, , ,	
	SACROILIAC JOINTS; THREE OR			
72202	MORE VIEWS	\$35.66	\$35.66	10/1/2008
-	RADIOLOGIC EXAMINATION, SACRUM	, , , , ,	*	
	AND COCCYX, MINIMUM OF TWO			
72220	VIEWS	\$31.07	\$31.07	10/1/2008
	MYELOGRAPHY, CERVICAL,	•		
	RADIOLOGICAL SUPERVISION AND			
72240	INTERPRETATION	\$187.36	\$187.36	10/1/2008
	MYELOGRAPHY, THORACIC,			
	RADIOLOGICAL SUPERVISION AND			
72255	INTERPRETATION	\$172.14	\$172.14	10/1/2008
	MYELOGRAPHY, LUMBOSACRAL,			
	RADIOLOGICAL SUPERVISION AND			
72265	INTERPRETATION	\$169.39	\$169.39	10/1/2008
	MYELOGRAPHY, TWO OR MORE			
	REGIONS (EG, LUMBAR/THORACIC,			
72270	CERVICAL THORACIC,	\$261.78	\$261.78	10/1/2008
		, ,		
	EPIDUROGRAPHY, RADIOLOGICAL			
72275	SUPERVISION AND INTERPRETATION	\$113.10	\$113.10	10/1/2008



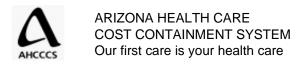
PROC	DESCRIPTION	NON FAC RATE	FAC RATE	EFF DATE
		2009	2009	
	DISKOGRAPHY, CERVICAL OR			
	THORACIC, RADIOLOGICAL			
72285	SUPERVISION AND INTERPRETATION	\$253.07	\$253.07	10/1/2008
	RADIOLOGICAL SUPERVISION AND			
	INTERPRETATION, PERCUTANEOUS			
72291	VERTEBROPLASTY OR VERT	\$78.35	\$78.35	1/1/2007
	RADIOLOGICAL SUPERVISION AND			
72292	INTERPRETATION, PERCUTANEOUS VERTEBROPLASTY OR VERT	\$92.64	\$92.64	1/1/2007
12292	DISKOGRAPHY, LUMBAR,	φ92.04	φ92.04	1/1/2007
	RADIOLOGICAL SUPERVISION AND			
72295	INTERPRETATION	\$229.14	\$229.14	10/1/2008
	RADIOLOGIC EXAMINATION;			
73000	CLAVICLE, COMPLETE	\$28.01	\$28.01	10/1/2008
	RADIOLOGIC EXAMINATION;	_		
73010	SCAPULA, COMPLETE	\$29.19	\$29.19	10/1/2008
73020	RADIOLOGIC EXAMINATION, SHOULDER; ONE VIEW	\$24.56	\$24.56	10/1/2008
70020	RADIOLOGIC EXAMINATION,	Ψ2 1.00	Ψ21.00	10/1/2000
	SHOULDER; COMPLETE, MINIMUM OF			
73030	TWO VIEWS	\$31.07	\$31.07	10/1/2008
	RADIOLOGIC EXAMINATION,			
70040	SHOULDER, ARTHROGRAPHY,	0.110 70	#110 70	40/4/0000
73040	RADIOLOGICAL SUPERVISION AND	\$110.78	\$110.78	10/1/2008
	RADIOLOGIC EXAMINATION; ACROMIOCLAVICULAR JOINTS,			
73050	BILATERAL, WITH OR WITHOUT	\$36.84	\$36.84	10/1/2008
70000	SIERTERAL, WITH SIX WITHOUT	ψου.σ τ	φοσ.σ τ	10/1/2000
	RADIOLOGIC EXAMINATION;			
73060	HUMERUS, MINIMUM OF TWO VIEWS	\$30.68	\$30.68	10/1/2008
	RADIOLOGIC EXAMINATION, ELBOW;			
73070	TWO VIEWS	\$27.62	\$27.62	10/1/2008
	RADIOLOGIC EXAMINATION, ELBOW;			
73080	COMPLETE, MINIMUM OF THREE VIEWS	\$34.13	\$34.13	10/1/2008
1 3000	RADIOLOGIC EXAMINATION, ELBOW,	φυ 4 .13	φυ 4 .13	10/1/2000
	ARTHROGRAPHY, RADIOLOGICAL			
73085	SUPERVISION AND	\$103.13	\$103.13	10/1/2008
	RADIOLOGIC EXAMINATION;	·		
73090	FOREARM, TWO VIEWS	\$28.01	\$28.01	10/1/2008



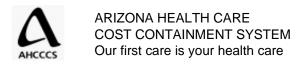
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE	_	EFF DATE
		2009	2009	
	RADIOLOGIC EXAMINATION; UPPER			
	EXTREMITY, INFANT, MINIMUM OF			
73092	TWO VIEWS	\$28.01	\$28.01	10/1/2008
	RADIOLOGIC EXAMINATION, WRIST;			
73100	TWO VIEWS	\$28.40	\$28.40	10/1/2008
	RADIOLOGIC EXAMINATION, WRIST;			
	COMPLETE, MINIMUM OF THREE			
73110	VIEWS	\$32.99	\$32.99	10/1/2008
	RADIOLOGIC EXAMINATION, WRIST,			
	ARTHROGRAPHY, RADIOLOGICAL			
73115	SUPERVISION AND	\$101.25	\$101.25	10/1/2008
70100	RADIOLOGIC EXAMINATION, HAND;	***	407.00	40/4/0000
73120	TWO VIEWS	\$27.62	\$27.62	10/1/2008
70400	RADIOLOGIC EXAMINATION, HAND; MINIMUM OF THREE VIEWS	₽04.0 7	CO4 07	40/4/0000
73130	WINIVION OF THREE VIEWS	\$31.07	\$31.07	10/1/2008
	RADIOLOGIC EXAMINATION,			
73140	FINGER(S), MINIMUM OF TWO VIEWS	\$27.23	\$27.23	10/1/2009
73140	COMPUTED TOMOGRAPHY, UPPER	\$21.23	\$21.23	10/1/2008
	EXTREMITY; WITHOUT CONTRAST			
73200	MATERIAL	\$255.70	\$255.70	10/1/2008
70200	COMPUTED TOMOGRAPHY, UPPER	Ψ200.70	Ψ200.70	10/1/2000
	EXTREMITY; WITH CONTRAST			
73201	MATERIAL(S)	\$324.78	\$324.78	10/1/2008
	COMPUTED TOMOGRAPHY, UPPER	ψο= σ	ψο σ	, .,
	EXTREMITY; WITHOUT CONTRAST			
73202	MATERIAL, FOLLOWED BY	\$386.96	\$386.96	10/1/2008
	COMPUTED TOMOGRAPHIC			
	ANGIOGRAPHY, UPPER EXTREMITY,			
73206	WITH CONTRAST MATERIAL(S), IN	\$419.40	\$419.40	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, UPPER			
73218	EXTREMITY, OTHER THAN JOINT;	\$477.07	\$477.07	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, UPPER			
73219	EXTREMITY, OTHER THAN JOINT;	\$478.13	\$478.13	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, UPPER			
73220	EXTREMITY, OTHER THAN JOINT;	\$835.98	\$835.98	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, ANY JOINT OF			
73221	UPPER EXTREMITY; WITHOUT	\$472.01	\$472.01	10/1/2008



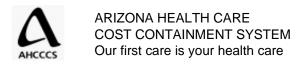
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PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
11100	DESCRIPTION	2009	2009	211 27112
	MAGNETIC RESONANCE (EG,	2000		
	PROTON) IMAGING, ANY JOINT OF			
73222	UPPER EXTREMITY; WITH	\$549.57	\$549.57	10/1/2008
-	MAGNETIC RESONANCE (EG,	*	, · · · · ·	
	PROTON) IMAGING, ANY JOINT OF			
73223	UPPER EXTREMITY; WITHOUT	\$829.16	\$829.16	10/1/2008
		·		
	MAGNETIC RESONANCE			
	ANGIOGRAPHY, UPPER EXTREMITY,			
73225	WITH OR WITHOUT CONTRAST	\$588.33	\$588.33	10/1/2008
	RADIOLOGIC EXAMINATION, HIP;	*	, and a	
73500	UNILATERAL, ONE VIEW	\$26.48	\$26.48	10/1/2008
	RADIOLOGIC EXAMINATION, HIP,		, ,	
	UNILATERAL; COMPLETE, MINIMUM			
73510	OF TWO VIEWS	\$36.05	\$36.05	10/1/2008
	RADIOLOGIC EXAMINATION, HIPS,	, , , , ,	*	
	BILATERAL, MINIMUM OF TWO VIEWS			
73520	OF EACH HIP,	\$40.33	\$40.33	10/1/2008
	RADIOLOGIC EXAMINATION, HIP,	* 10100	V 10100	
	ARTHROGRAPHY, RADIOLOGICAL			
73525	SUPERVISION AND	\$103.13	\$103.13	10/1/2008
. 0020	RADIOLOGIC EXAMINATION, HIP,	ψ.σσσ	ψ.000	
73530	DURING OPERATIVE PROCEDURE	\$35.51	\$35.51	4/1/2006
	RADIOLOGIC EXAMINATION, PELVIS	φσσ.σ.	ψοσιο :	., .,
	AND HIPS, INFANT OR CHILD,			
73540	MINIMUM OF TWO VIEWS	\$36.44	\$36.44	10/1/2008
70010	RADIOLOGICAL EXAMINATION,	φοσιτι	φοσ. ι ι	10/1/2000
	SACROILIAC JOINT ARTHROGRAPHY,			
73542	RADIOLOGICAL	\$90.93	\$90.93	10/1/2008
7 00 12	RADIOLOGIC EXAMINATION, FEMUR,	φοσισσ	ψου.σο	10/1/2000
73550	TWO VIEWS	\$30.29	\$30.29	10/1/2008
7.0000	RADIOLOGIC EXAMINATION, KNEE:	ψου.20	ψου.20	10/1/2000
73560	ONE OR TWO VIEWS	\$29.19	\$29.19	10/1/2008
7.0000	RADIOLOGIC EXAMINATION, KNEE;	Ψ20.10	Ψ20.10	10/1/2000
73562	THREE VIEWS	\$34.13	\$34.13	10/1/2008
70002	RADIOLOGIC EXAMINATION, KNEE;	ΨΟΙ.ΤΟ	ψο 1.10	10/1/2000
73564	COMPLETE, FOUR OR MORE VIEWS	\$38.76	\$38.76	10/1/2008
. 500 .	RADIOLOGIC EXAMINATION, KNEE;	Ψ00.70	ψοσ.7 σ	10/1/2000
	BOTH KNEES, STANDING,			
73565	ANTEROPOSTERIOR	\$29.93	\$29.93	10/1/2008
. 5555	RADIOLOGIC EXAMINATION, KNEE,	Ψ20.00	Ψ20.00	10/1/2000
	ARTHROGRAPHY, RADIOLOGICAL			
73580	SUPERVISION AND	\$127.57	\$127.57	10/1/2008
1 3300	OUI ERVIOION AND	φ121.31	φ121.31	10/1/2000



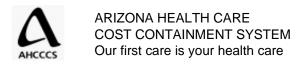
		NON FAC	EAC DATE	
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
		2009	2009	
	RADIOLOGIC EXAMINATION; TIBIA			
73590	AND FIBULA, TWO VIEWS	\$28.40	\$28.40	10/1/2008
	RADIOLOGIC EXAMINATION; LOWER			
	EXTREMITY, INFANT, MINIMUM OF			
73592	TWO VIEWS	\$28.01	\$28.01	10/1/2008
	RADIOLOGIC EXAMINATION, ANKLE;			
73600	TWO VIEWS	\$27.62	\$27.62	10/1/2008
	RADIOLOGIC EXAMINATION, ANKLE;			
70010	COMPLETE, MINIMUM OF THREE	***	004.07	40/4/0000
73610	VIEWS	\$31.07	\$31.07	10/1/2008
	RADIOLOGIC EXAMINATION, ANKLE,			
70045	ARTHROGRAPHY, RADIOLOGICAL	# 400.40	# 400.40	40/4/0000
73615	SUPERVISION AND RADIOLOGIC EXAMINATION, FOOT:	\$106.19	\$106.19	10/1/2008
73620	TWO VIEWS	\$27.26	\$27.26	10/1/2008
73020	RADIOLOGIC EXAMINATION, FOOT;	φ21.20	φ27.20	10/1/2006
	COMPLETE, MINIMUM OF THREE			
73630	VIEWS	\$31.07	\$31.07	10/1/2008
70000	RADIOLOGIC EXAMINATION;	φοτιστ	ψ01.07	10/1/2000
	CALCANEUS, MINIMUM OF TWO			
73650	VIEWS	\$26.87	\$26.87	10/1/2008
	RADIOLOGIC EXAMINATION; TOE(S),			
73660	MINIMUM OF TWO VIEWS	\$26.44	\$26.44	10/1/2008
	COMPUTED TOMOGRAPHY, LOWER			
	EXTREMITY; WITHOUT CONTRAST			
73700	MATERIAL	\$255.70	\$255.70	10/1/2008
	COMPUTED TOMOGRAPHY, LOWER			
	EXTREMITY; WITH CONTRAST			
73701	MATERIAL(S)	\$326.31	\$326.31	10/1/2008
	COMPUTED TOMOGRAPHY, LOWER			
	EXTREMITY; WITHOUT CONTRAST	0007.55	\$007.55	40/4/0000
73702	MATERIAL, FOLLOWED BY	\$387.55	\$387.55	10/1/2008
	COMPLITED TOMOGRAPHIC			
	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, LOWER EXTREMITY,			
73706	WITH CONTRAST MATERIAL(S), IN	\$424.11	\$424.11	10/1/2008
73700	MAGNETIC RESONANCE (EG.	Ψ424.11	Ψ424.11	10/1/2000
	PROTON) IMAGING, LOWER			
73718	EXTREMITY OTHER THAN JOINT;	\$475.15	\$475.15	10/1/2008
	MAGNETIC RESONANCE (EG,	+ 11 21.10	+ 11 23.0	1 27 17 = 0 0 0
	PROTON) IMAGING, LOWER			
	EXTREMITY OTHER THAN JOINT;			
73719	WITH	\$478.13	\$478.13	10/1/2008



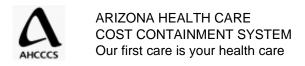
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PROC	DESCRIPTION	NON FAC RATE	FAC RATE 2009	EFF DATE
		2009		
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, LOWER			
73720	EXTREMITY OTHER THAN JOINT;	\$835.43	\$835.43	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, ANY JOINT OF			
73721	LOWER EXTREMITY; WITHOUT	\$473.38	\$473.38	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, ANY JOINT OF			
73722	LOWER EXTREMITY; WITH	\$550.74	\$550.74	10/1/2008
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, ANY JOINT OF			
73723	LOWER EXTREMITY; WITHOUT	\$829.16	\$829.16	10/1/2008
	· ·	·	·	
	MAGNETIC RESONANCE			
	ANGIOGRAPHY, LOWER EXTREMITY,			
73725	WITH OR WITHOUT CONTRAST	\$487.66	\$487.66	10/1/2008
	RADIOLOGIC EXAMINATION,	ψ.σσσ	ψ.σσσ	. 0, ., _ 0 0
	ABDOMEN; SINGLE			
74000	ANTEROPOSTERIOR VIEW	\$27.26	\$27.26	10/1/2008
7 1000	RADIOLOGIC EXAMINATION,	Ψ27.20	Ψ27.20	10/1/2000
	ABDOMEN; ANTEROPOSTERIOR AND			
74010	ADDITIONAL OBLIQUE AND	\$37.23	\$37.23	10/1/2008
7-1010	RADIOLOGIC EXAMINATION,	ψ37.23	ψ37.23	10/1/2000
	ABDOMEN; COMPLETE, INCLUDING			
74020	DECUBITUS AND/OR ERECT	\$40.33	\$40.33	10/1/2008
74020	RADIOLOGIC EXAMINATION,	φ40.33	φ40.33	10/1/2000
	ABDOMEN; COMPLETE ACUTE			
74022	ABDOMEN, COMPLETE ACOTE ABDOMEN SERIES, INCLUDING	\$47.98	\$47.98	10/1/2009
74022	·	Ф4 7.90	φ47.90	10/1/2008
	COMPUTED TOMOGRAPHY,			
74450	ABDOMEN; WITHOUT CONTRAST MATERIAL	# 000 00	Фосо оо	40/4/2000
74150		\$269.98	\$269.98	10/1/2008
	COMPUTED TOMOGRAPHY,			
74400	ABDOMEN; WITH CONTRAST	00.40.50	#0.40.50	40/4/0000
74160	MATERIAL(S)	\$348.52	\$348.52	10/1/2008
	COMPUTED TOMOGRAPHY,			
	ABDOMEN; WITHOUT CONTRAST			
74170	MATERIAL, FOLLOWED BY CONTRAST	\$419.64	\$419.64	10/1/2008
	COMPUTED TOMOGRAPHIC			
	ANGIOGRAPHY, ABDOMEN, WITH			
74175	CONTRAST MATERIAL(S), INCLUDING	\$496.45	\$496.45	10/1/2008



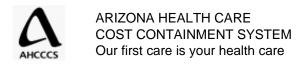
110001110111111111111111111111111111111	licable FARS/DFARS apply.	NON EAC		
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2009	
	MAGNETIC RESONANCE (EG,			
	PROTON) IMAGING, ABDOMEN;			
74181	WITHOUT CONTRAST MATERIAL(S)	\$472.80	\$472.80	10/1/2008
7 1101	MAGNETIC RESONANCE (EG,	ψ.7.2.00	ψ11 <u>2.00</u>	10/1/2000
	PROTON) IMAGING, ABDOMEN; WITH			
74182	CONTRAST MATERIAL(S)	የ ድርስ በ2	\$569.93	10/1/2000
74102	()	\$569.93	\$509.93	10/1/2008
	MAGNETIC RESONANCE (EG,			
74400	PROTON) IMAGING, ABDOMEN;	# 0.40.40	# 0.40.40	40/4/0000
74183	WITHOUT CONTRAST MATERIAL(S),	\$842.10	\$842.10	10/1/2008
	MAGNETIC RESONANCE			
	ANGIOGRAPHY, ABDOMEN, WITH OR			
74185	WITHOUT CONTRAST MATERIAL(S)	\$531.17	\$531.17	10/1/2008
	PERITONEOGRAM (EG, AFTER			
	INJECTION OF AIR OR CONTRAST),			
74190	RADIOLOGICAL	\$77.10	\$77.10	4/1/2006
	RADIOLOGIC EXAMINATION;	*	*	
	PHARYNX AND/OR CERVICAL			
74210	ESOPHAGUS	\$74.38	\$74.38	10/1/2008
74210	RADIOLOGIC EXAMINATION;	Ψ1 4.00	ψ1 4.00	10/1/2000
74220	ESOPHAGUS	\$83.28	\$83.28	10/1/2008
74220	SWALLOWING FUNCTION, WITH	ψ05.20	ψ03.20	10/1/2000
74000	CINERADIOGRAPHY/VIDEORADIOGRA	07.50	07.50	40/4/0000
74230	PHY	\$87.52	\$87.52	10/1/2008
	REMOVAL OF FOREIGN BODY(S),			
	ESOPHAGEAL, WITH USE OF			
74235	BALLOON CATHETER,	\$164.76	\$164.76	4/1/2006
	RADIOLOGIC EXAMINATION,			
	GASTROINTESTINAL TRACT, UPPER;			
74240	WITH OR WITHOUT DELAYED	\$104.47	\$104.47	10/1/2008
	RADIOLOGIC EXAMINATION,			
	GASTROINTESTINAL TRACT, UPPER;			
74241	WITH OR WITHOUT DELAYED	\$109.80	\$109.80	10/1/2008
	RADIOLOGIC EXAMINATION,	* 100100	4	
	GASTROINTESTINAL TRACT, UPPER;			
74245	WITH SMALL INTESTINE,	\$164.61	\$164.61	10/1/2008
1-72-70	RADIOLOGICAL EXAMINATION,	Ψ104.01	ψ104.01	10/1/2000
	GASTROINTESTINAL TRACT, UPPER,			
74046	·	#440.00	¢440.00	40/4/2022
74246	AIR CONTRAST, WITH	\$118.20	\$118.20	10/1/2008
	RADIOLOGICAL EXAMINATION,			
	GASTROINTESTINAL TRACT, UPPER,	_		
74247	AIR CONTRAST, WITH	\$118.75	\$118.75	10/1/2008



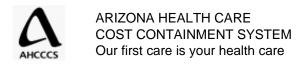
PROC	DESCRIPTION	NON FAC RATE	FAC RATE	EFF DATE
11100	BEGORII MON	2009	2009	EII BAIL
	RADIOLOGICAL EXAMINATION,			
7.10.10	GASTROINTESTINAL TRACT, UPPER,	0.170.00	# 4 7 0.00	40/4/0000
74249	AIR CONTRAST, WITH	\$176.06	\$176.06	10/1/2008
	RADIOLOGIC EXAMINATION, SMALL			
74250	INTESTINE, INCLUDES MULTIPLE SERIAL FILMS;	\$94.74	\$94.74	10/1/2008
74230	RADIOLOGIC EXAMINATION, SMALL	φ94.74	φ94.74	10/1/2006
	INTESTINE, INCLUDES MULTIPLE			
74251	SERIAL FILMS; VIA	\$176.42	\$176.42	10/1/2008
74260	DUODENOGRAPHY, HYPOTONIC	\$113.18	\$113.18	10/1/2008
	RADIOLOGIC EXAMINATION, COLON;			
	CONTRAST (EG, BARIUM) ENEMA,			
74270	WITH OR WITHOUT KUB	\$121.10	\$121.10	10/1/2008
	RADIOLOGIC EXAMINATION, COLON;			
	AIR CONTRAST WITH SPECIFIC HIGH			
74280	DENSITY BARIUM,	\$183.79	\$183.79	10/1/2008
	THERAPEUTIC ENEMA, CONTRAST			
74283	OR AIR, FOR REDUCTION OF INTUSSUSCEPTION OR OTHER	¢106.02	¢196 02	10/1/2008
74203	CHOLECYSTOGRAPHY, ORAL	\$186.93	\$186.93	10/1/2006
74290	CONTRAST;	\$59.47	\$59.47	10/1/2008
	,	φσσ	ψοσι	10/1/2000
	CHOLECYSTOGRAPHY, ORAL			
	CONTRAST; ADDITIONAL OR REPEAT			
74291	EXAMINATION OR MULTIPLE	\$47.19	\$47.19	10/1/2008
	CHOLANGIOGRAPHY AND/OR			
	PANCREATOGRAPHY;			
74300	INTRAOPERATIVE, RADIOLOGICAL	\$18.61	\$18.61	4/1/2006
	CHOLANGIOGRAPHY AND/OR			
74204	PANCREATOGRAPHY; ADDITIONAL SET INTRAOPERATIVE,	\$11.31	¢44.24	4/1/2006
74301	SET INTRAOPERATIVE,	\$11.31	\$11.31	4/1/2006
	CHOLANGIOGRAPHY AND/OR			
	PANCREATOGRAPHY; THROUGH			
74305	EXISTING CATHETER, RADIOLOGICAL	\$53.34	\$53.34	4/1/2006
	CHOLANGIOGRAPHY,	,	*	
	PERCUTANEOUS, TRANSHEPATIC,			
74320	RADIOLOGICAL SUPERVISION AND	\$130.24	\$130.24	10/1/2008
	POSTOPERATIVE BILIARY DUCT			
7.4007	CALCULUS REMOVAL,	040400	# 404.33	40/4/0000
74327	PERCUTANEOUS VIA T-TUBE TRACT,	\$124.32	\$124.32	10/1/2008



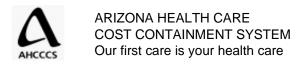
Reserved. Ap	plicable FARS/DFARS apply.			
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE 2009	2009	EFF DATE
	ENDOSCOPIC CATHETERIZATION OF			
	THE BILIARY DUCTAL SYSTEM,			
74328	RADIOLOGICAL	\$162.08	\$162.08	4/1/2006
	ENDOSCOPIC CATHETERIZATION OF			
74329	THE PANCREATIC DUCTAL SYSTEM, RADIOLOGICAL	\$161.11	\$161.11	4/1/2006
74329	COMBINED ENDOSCOPIC	\$101.11	\$101.11	4/1/2000
	CATHETERIZATION OF THE BILIARY			
74330	AND PANCREATIC DUCTAL	\$172.32	\$172.32	4/1/2006
	INTRODUCTION OF LONG	¥111212	Ţ	
	GASTROINTESTINAL TUBE (EG,			
74340	MILLER-ABBOTT), INCLUDING	\$132.59	\$132.59	4/1/2006
	PERCUTANEOUS PLACEMENT OF			
	ENTEROCLYSIS TUBE,			
74355	RADIOLOGICAL SUPERVISION AND	\$143.96	\$143.96	4/1/2006
	INTRALUMINAL DILATION OF			
7.4000	STRICTURES AND/OR	0.15.4.40	0.5.4.40	4/4/0000
74360	OBSTRUCTIONS (EG, ESOPHAGUS),	\$154.10	\$154.10	4/1/2006
	PERCUTANEOUS TRANSHEPATIC DILATION OF BILIARY DUCT			
74363	STRICTURE WITH OR WITHOUT	\$287.43	\$287.43	4/1/2006
74303	UROGRAPHY (PYELOGRAPHY),	φ207.43	φ207.43	4/1/2000
	INTRAVENOUS, WITH OR WITHOUT			
74400	KUB, WITH OR WITHOUT TOMOG	\$106.55	\$106.55	10/1/2008
	UROGRAPHY, INFUSION, DRIP	+	, , , , , ,	
	TECHNIQUE AND/OR BOLUS			
74410	TECHNIQUE;	\$113.45	\$113.45	10/1/2008
	UROGRAPHY, INFUSION, DRIP			
	TECHNIQUE AND/OR BOLUS			
74415	TECHNIQUE; WITH	\$128.36	\$128.36	10/1/2008
7.4.400	UROGRAPHY, RETROGRADE, WITH	# 400 # 4	# 400 5 4	4/4/0000
74420	OR WITHOUT KUB	\$123.51	\$123.51	4/1/2006
	UROGRAPHY, ANTEGRADE,			
	(PYELOSTOGRAM, NEPHROSTOGRAM, LOOPOGRAM),			
74425	RADIOLOGICAL	\$71.05	\$71.05	4/1/2006
74420	TURBIOLOGICAL	ψ/ 1.00	ψ/ 1.00	4/1/2000
	CYSTOGRAPHY, MINIMUM OF THREE			
	VIEWS, RADIOLOGICAL SUPERVISION			
74430	AND INTERPRETATION	\$73.59	\$73.59	10/1/2008
	VASOGRAPHY, VESICULOGRAPHY,			
	OR EPIDIDYMOGRAPHY,			
74440	RADIOLOGICAL SUPERVISION AND	\$80.15	\$80.15	10/1/2008



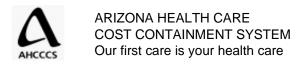
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PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
PROC	DESCRIPTION		2009	EFF DATE
	CORRORA CAVERNOCOCRARILY	2009		
	CORPORA CAVERNOSOGRAPHY, RADIOLOGICAL SUPERVISION AND			
74445	INTERPRETATION	\$104.86	\$104.86	4/1/2006
74443	INTERFRETATION	\$104.80	\$104.00	4/1/2000
	URETHROCYSTOGRAPHY,			
	RETROGRADE, RADIOLOGICAL			
74450	SUPERVISION AND INTERPRETATION	\$75.58	\$75.58	4/1/2006
		ψ. σ.σσ	ψ. σ.σσ	., .,
	URETHROCYSTOGRAPHY, VOIDING,			
	RADIOLOGICAL SUPERVISION AND			
74455	INTERPRETATION	\$89.99	\$89.99	10/1/2008
	RADIOLOGIC EXAMINATION, RENAL			
	CYST STUDY, TRANSLUMBAR,			
74470	CONTRAST VISUALIZATION,	\$77.87	\$77.87	4/1/2006
	INTRODUCTION OF INTRACATHETER			
	OR CATHETER INTO RENAL PELVIS			
74475	FOR DRAINAGE AND/OR	\$149.66	\$149.66	10/1/2008
	INTRODUCTION OF URETERAL			
	CATHETER OR STENT INTO URETER			
74480	THROUGH RENAL PELVIS FOR	\$149.66	\$149.66	10/1/2008
	DILATION OF NEPHROSTOMY,			
74405	URETERS, OR URETHRA,	#422.20	¢400.00	40/4/2000
74485	RADIOLOGICAL SUPERVISION AND	\$133.26	\$133.26	10/1/2008
74740	PELVIMETRY, WITH OR WITHOUT PLACENTAL LOCALIZATION	¢40.40	¢40.40	10/1/2009
74710	HYSTEROSALPINGOGRAPHY,	\$49.12	\$49.12	10/1/2008
	RADIOLOGICAL SUPERVISION AND			
74740	INTERPRETATION	\$77.44	\$77.44	10/1/2008
74740	PERINEOGRAM (EG, VAGINOGRAM,	Ψ11.44	Ψ11.44	10/1/2000
	FOR SEX DETERMINATION OR			
74775	EXTENT OF ANOMALIES)	\$90.74	\$90.74	4/1/2006
	CARDIAC MAGNETIC RESONANCE	φσσινι	φοσ	17 172000
	IMAGING FOR MORPHOLOGY AND			
75557	FUNCTION WITHOUT CONTRAST	\$464.75	\$464.75	10/1/2008
	CARDIAC MAGNETIC RESONANCE			
	IMAGING FOR MORPHOLOGY AND			
75558	FUNCTION WITHOUT CONTRAST	\$603.04	\$603.04	10/1/2008
	CARDIAC MAGNETIC RESONANCE			
	IMAGING FOR MORPHOLOGY AND			
75559	FUNCTION WITHOUT CONTRAST	\$498.53	\$498.53	10/1/2008



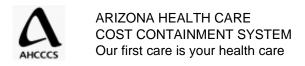
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PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	CARDIAC MAGNETIC RESONANCE			
	IMAGING FOR MORPHOLOGY AND			
75560	FUNCTION WITHOUT CONTRAST	\$784.40	\$784.40	10/1/2008
	CARDIAC MAGNETIC RESONANCE IMAGING FOR MORPHOLOGY AND			
75561	FUNCTION WITHOUT CONTRAST	\$659.84	\$659.84	10/1/2008
75561	CARDIAC MAGNETIC RESONANCE	Φ009.04	Ф009.04	10/1/2006
	IMAGING FOR MORPHOLOGY AND			
75562	FUNCTION WITHOUT CONTRAST	\$778.12	\$778.12	10/1/2008
	CARDIAC MAGNETIC RESONANCE	ψ. : σ. : <u>-</u>	ψ σ <u>_</u>	. 0, ., _ 000
	IMAGING FOR MORPHOLOGY AND			
75563	FUNCTION WITHOUT CONTRAST	\$687.18	\$687.18	10/1/2008
	CARDIAC MAGNETIC RESONANCE			
	IMAGING FOR MORPHOLOGY AND			
75564	FUNCTION WITHOUT CONTRAST	\$914.80	\$914.80	10/1/2008
	AORTOGRAPHY, THORACIC,			
	WITHOUT SERIALOGRAPHY,			
	RADIOLOGICAL SUPERVISION AND			
75600	INTER	\$409.44	\$409.44	10/1/2008
	AORTOGRAPHY, THORACIC, BY			
	SERIALOGRAPHY, RADIOLOGICAL			
75605	SUPERVISION AND	\$381.63	\$381.63	10/1/2008
	AORTOGRAPHY, ABDOMINAL, BY			
	SERIALOGRAPHY, RADIOLOGICAL		.	
75625	SUPERVISION AND	\$377.78	\$377.78	10/1/2008
	AORTOGRAPHY, ABDOMINAL PLUS			
75000	BILATERAL ILIOFEMORAL LOWER	0.400.40	# 400 40	40/4/0000
75630	EXTREMITY, CATHETER, BY	\$426.43	\$426.43	10/1/2008
	COMPLITED TOMOCDARIUS			
	COMPUTED TOMOGRAPHIC ANGIOGRAPHY, ABDOMINAL AORTA			
75635	AND BILATERAL ILIOFEMORAL LOWE	\$580.56	\$580.56	10/1/2008
73033	AND BIEATERAL IEIOT EMORAL LOWE	φ360.30	\$360.56	10/1/2006
	ANGIOGRAPHY, CERVICOCEREBRAL,			
	CATHETER, INCLUDING VESSEL			
75650	ORIGIN, RADIOLOGICAL	\$395.67	\$395.67	10/1/2008
. 0000		φοσοισι	φσσ.σ.	. 0, ., _ 000
	ANGIOGRAPHY, BRACHIAL,			
	RETROGRADE, RADIOLOGICAL			
75658	SUPERVISION AND INTERPRETATION	\$393.24	\$393.24	10/1/2008
	ANGIOGRAPHY, EXTERNAL CAROTID,			
	UNILATERAL, SELECTIVE,			
75660	RADIOLOGICAL SUPERVISION	\$395.16	\$395.16	10/1/2008



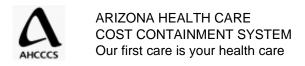
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DDOC	DECODIDATION		FAC RATE	
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009		
	ANGIOGRAPHY, EXTERNAL CAROTID,			
	BILATERAL, SELECTIVE,			
75662	RADIOLOGICAL SUPERVISION	\$431.80	\$431.80	10/1/2008
	ANGIOGRAPHY, CAROTID,			
	CEREBRAL, UNILATERAL,			
75665	RADIOLOGICAL SUPERVISION AND	\$400.46	\$400.46	10/1/2008
	ANGIOGRAPHY, CAROTID,			
	CEREBRAL, BILATERAL,			
75671	RADIOLOGICAL SUPERVISION AND	\$432.94	\$432.94	10/1/2008
	ANGIOGRAPHY, CAROTID, CERVICAL,	*	,	
	UNILATERAL, RADIOLOGICAL			
75676	SUPERVISION AND	\$395.12	\$395.12	10/1/2008
75070	ANGIOGRAPHY, CAROTID, CERVICAL,	ψ000.12	ψ000.12	10/1/2000
	BILATERAL, RADIOLOGICAL			
75680	SUPERVISION AND	\$423.37	\$423.37	10/1/2008
75000	ANGIOGRAPHY, VERTEBRAL,	Ψ423.37	Ψ423.37	10/1/2006
	CERVICAL, AND/OR INTRACRANIAL,			
75005	RADIOLOGICAL SUPERVISION	#205.40	#205 40	40/4/2000
75685	RADIOLOGICAL SUPERVISION	\$395.16	\$395.16	10/1/2008
	ANGIGORABINA OBINAL OBLECTIVE			
	ANGIOGRAPHY, SPINAL, SELECTIVE,			
	RADIOLOGICAL SUPERVISION AND			
75705	INTERPRETATION	\$438.63	\$438.63	10/1/2008
	ANGIOGRAPHY, EXTREMITY,			
	UNILATERAL, RADIOLOGICAL			
75710	SUPERVISION AND INTERPRETATION	\$390.02	\$390.02	10/1/2008
	ANGIOGRAPHY, EXTREMITY,			
	BILATERAL, RADIOLOGICAL			
75716	SUPERVISION AND INTERPRETATION	\$415.01	\$415.01	10/1/2008
	ANGIOGRAPHY, RENAL, UNILATERAL,			
	SELECTIVE (INCLUDING FLUSH			
75722	AORTOGRAM),	\$387.35	\$387.35	10/1/2008
	ANGIOGRAPHY, RENAL, BILATERAL,	·		
	SELECTIVE (INCLUDING FLUSH			
75724	AORTOGRAM),	\$427.05	\$427.05	10/1/2008
	ANGIOGRAPHY, VISCERAL,	, 100	, ,,,,,	
	SELECTIVE OR SUPRASELECTIVE,			
75726	(WITH OR WITHOUT FLUSH	\$385.08	\$385.08	10/1/2008
. 5. 25	ANGIOGRAPHY, ADRENAL,	Ψ500.00	\$300.00	10/1/2000
	UNILATERAL, SELECTIVE,			
75731	RADIOLOGICAL SUPERVISION AND	\$391.94	\$391.94	10/1/2008
13131	IN DIOLOGICAL GOT LIVISION AND	φ391.9 4	φ391.9 4	10/1/2008



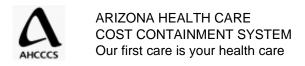
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DESCRIPTION			EFF DATE
DEGGIAII TIGIT		2009	2 272
ANGIOGRAPHY, ADRENAL,			
RADIOLOGICAL SUPERVISION AND	\$425.37	\$425.37	10/1/2008
ANGIOGRAPHY, PELVIC, SELECTIVE			
OR SUPRASELECTIVE,			
RADIOLOGICAL SUPERVISION AND	\$388.14	\$388.14	10/1/2008
ANGIOGRAPHY, PULMONARY,			
UNILATERAL, SELECTIVE,			
RADIOLOGICAL SUPERVISION AND	\$381.39	\$381.39	10/1/2008
ANGIOGRAPHY, PULMONARY,			
BILATERAL, SELECTIVE,			
RADIOLOGICAL SUPERVISION AND	\$403.48	\$403.48	10/1/2008
ANGIOGRAPHY, PULMONARY, BY			
NONSELECTIVE CATHETER OR			
VENOUS INJECTION,	\$380.88	\$380.88	10/1/2008
·			
INTERPRETATION	\$397.32	\$397.32	10/1/2008
·			
·	\$328.63	\$328.63	10/1/2008
RADIOLOGICAL	\$166.96	\$166.96	10/1/2008
LAMBUAN GLOOD A DUNC EXTREMENT			
, ,	#050.07	#050.07	4/4/0000
	\$259.97	\$259.97	4/1/2006
, , , , , , , , , , , , , , , , , , ,	\$276.54	Ф076 <i>Е</i> 4	4/4/2006
	\$276.54	\$276.54	4/1/2006
,			
, , , , , , , , , , , , , , , , , , ,	നാരം വ	#206.22	4/4/2006
	\$200.32	\$200.32	4/1/2006
	¢202.40	\$202.10	4/1/2006
TO TO TO TO TO THE TOTAL SOLIT AND	φ302.16	φ3∪∠.16	4/1/2000
SHIINTOGRAM FOR INIVESTIGATION			
	\$77.56	\$77.56	10/1/2008
	ANGIOGRAPHY, PELVIC, SELECTIVE OR SUPRASELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BY NONSELECTIVE CATHETER OR VENOUS INJECTION, ANGIOGRAPHY, INTERNAL MAMMARY, RADIOLOGICAL SUPERVISION AND	ANGIOGRAPHY, PELVIC, SELECTIVE RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PELVIC, SELECTIVE OR SUPRASELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULWONARY, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BY NONSELECTIVE CATHETER OR VENOUS INJECTION, S380.88 ANGIOGRAPHY, INTERNAL MAMMARY, RADIOLOGICAL SUPERVISION AND INTERPRETATION ANGIOGRAPHY, SELECTIVE, EACH ADDITIONAL VESSEL STUDIED AFTER BASIC EXAMINATION, ANGIOGRAPHY, ARTERIOVENOUS SHUNT (EG, DIALYSIS PATIENT), RADIOLOGICAL LYMPHANGIOGRAPHY, EXTREMITY ONLY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTER LYMPHANGIOGRAPHY, EXTREMITY ONLY, UNILATERAL, RADIOLOGICAL SUPERVISION AND LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, UNILATERAL, RADIOLOGICAL SUPERVISION AND \$226.32 LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, BILATERAL, RADIOLOGICAL SUPERVISION AND S286.32 SHUNTOGRAM FOR INVESTIGATION OF PREVIOUSLY PLACED	ANGIOGRAPHY, ADRENAL, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PELVIC, SELECTIVE OR SUPRASELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, UNILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BILATERAL, SELECTIVE, RADIOLOGICAL SUPERVISION AND ANGIOGRAPHY, PULMONARY, BY NONSELECTIVE CATHETER OR VENOUS INJECTION, ANGIOGRAPHY, INTERNAL MAMMARY, RADIOLOGICAL SUPERVISION AND INTERPRETATION ANGIOGRAPHY, SELECTIVE, EACH ADDITIONAL VESSEL STUDIED AFTER BASIC EXAMINATION, ANGIOGRAPHY, ARTERIOVENOUS SHUNT (EG, DIALYSIS PATIENT), RADIOLOGICAL LYMPHANGIOGRAPHY, EXTREMITY ONLY, UNILATERAL, RADIOLOGICAL SUPERVISION AND INTER LYMPHANGIOGRAPHY, EXTREMITY ONLY, UNILATERAL, RADIOLOGICAL SUPERVISION AND LYMPHANGIOGRAPHY, EXTREMITY ONLY, UNILATERAL, RADIOLOGICAL SUPERVISION AND LYMPHANGIOGRAPHY, EXTREMITY ONLY, BILATERAL, RADIOLOGICAL SUPERVISION AND LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, UNILATERAL, RADIOLOGICAL SUPERVISION AND S286.32 S286.32 LYMPHANGIOGRAPHY, PELVIC/ABDOMINAL, BILATERAL, RADIOLOGICAL SUPERVISION AND S286.32 S286.32 SHUNTOGRAM FOR INVESTIGATION OF PREVIOUSLY PLACED



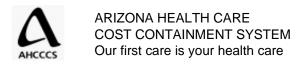
rtocorrou. 7tp	plicable FARS/DFARS apply.	NON EAC		
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	SPLENOPORTOGRAPHY,			
	RADIOLOGICAL SUPERVISION AND			
75810	INTERPRETATION	\$560.66	\$560.66	4/1/2006
	VENOODA BUIV EVEDEMITY			
	VENOGRAPHY, EXTREMITY, UNILATERAL, RADIOLOGICAL			
75820	SUPERVISION AND INTERPRETATION	\$107.57	\$107.57	10/1/2008
73620	OU ENVISION AND INTERFREDATION	\$107.57	\$107.57	10/1/2008
	VENOGRAPHY, EXTREMITY,			
	BILATERAL, RADIOLOGICAL			
75822	SUPERVISION AND INTERPRETATION	\$136.87	\$136.87	10/1/2008
	VENOGRAPHY, CAVAL, INFERIOR,			
	WITH SERIALOGRAPHY,			
75825	RADIOLOGICAL SUPERVISION AND	\$370.13	\$370.13	10/1/2008
	VENOGRAPHY, CAVAL, SUPERIOR,			
	WITH SERIALOGRAPHY,			
75827	RADIOLOGICAL SUPERVISION AND	\$369.78	\$369.78	10/1/2008
	VENOGRAPHY, RENAL, UNILATERAL,			
75004	SELECTIVE, RADIOLOGICAL	074.00	Ф074 CC	40/4/2000
75831	SUPERVISION AND VENOGRAPHY, RENAL, BILATERAL,	\$371.66	\$371.66	10/1/2008
	SELECTIVE, RADIOLOGICAL			
75833	SUPERVISION AND	\$399.48	\$399.48	10/1/2008
70000	VENOGRAPHY, ADRENAL,	φοσο. 10	φοσο. 1σ	10/1/2000
	UNILATERAL, SELECTIVE,			
75840	RADIOLOGICAL SUPERVISION AND	\$370.88	\$370.88	10/1/2008
	VENOGRAPHY, ADRENAL, BILATERAL,			
	SELECTIVE, RADIOLOGICAL			
75842	SUPERVISION AND	\$399.87	\$399.87	10/1/2008
	VENOGRAPHY, VENOUS SINUS (EG,			
	PETROSAL AND INFERIOR SAGITTAL)			
75860	OR JUGULAR,	\$378.21	\$378.21	10/1/2008
	VENOCRABILIV CURERIOR CACITTAL			
	VENOGRAPHY, SUPERIOR SAGITTAL SINUS, RADIOLOGICAL SUPERVISION			
75870	AND INTERPRETATION	\$376.64	\$376.64	10/1/2008
70070	VENOGRAPHY, EPIDURAL,	ψυ/ υ.υ4	ψ57 0.04	10/1/2000
	RADIOLOGICAL SUPERVISION AND			
75872	INTERPRETATION	\$394.10	\$394.10	10/1/2008
	VENOGRAPHY, ORBITAL,		, , , ,	
	RADIOLOGICAL SUPERVISION AND			
75880	INTERPRETATION	\$111.77	\$111.77	10/1/2008



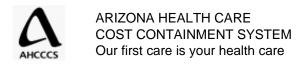
olicable FARS/DFARS apply.	NON EAC		
		FAC RATE	
DESCRIPTION			EFF DATE
	2009	2000	
PORTOGRAPHY WITH HEMODYNAMIC			
EVALUATION, RADIOLOGICAL	\$386.84	\$386.84	10/1/2008
PERCUTANEOUS TRANSHEPATIC			
HEMODYNAMIC EVALUATION,	\$391.43	\$391.43	10/1/2008
HEPATIC VENOGRAPHY, WEDGED OR			
FREE, WITH HEMODYNAMIC			
EVALUATION, RADIOLOGICAL	\$372.05	\$372.05	10/1/2008
HEPATIC VENOGRAPHY, WEDGED OR			
FREE, WITHOUT HEMODYNAMIC			
EVALUATION,	\$371.70	\$371.70	10/1/2008
VENOUS SAMPLING THROUGH			
CATHETER, WITH OR WITHOUT			
ANGIOGRAPHY (EG, FOR	\$342.91	\$342.91	10/1/2008
TRANSCATHETER THERAPY,			
EMBOLIZATION, ANY METHOD,			
RADIOLOGICAL SUPERVISION AND IN	\$1,030.29	\$1,030.29	4/1/2006
TRANSCATHETER THERAPY,			
INFUSION, ANY METHOD (EG,			
THROMBOLYSIS OTHER THAN	\$904.51	\$904.51	4/1/2006
ANGIOGRAPHY THROUGH EXISTING			
CATHETER FOR FOLLOW-UP STUDY			
FOR TRANSCATHETER	\$127.95	\$127.95	4/1/2006
EXCHANGE OF A PREVIOUSLY			
PLACED INTRAVASCULAR CATHETER			
DURING THROMBOLYTIC THERA	\$854.18	\$854.18	4/1/2006
MECHANICAL REMOVAL OF	·	·	
PERICATHETER OBSTRUCTIVE			
	\$155.55	\$155.55	10/1/2008
OBSTRUCTIVE MATERIAL FROM '	\$103.06	\$103.06	10/1/2008
PERCUTANEOUS PLACEMENT OF IVC			
FILTER, RADIOLOGICAL SUPERVISION			
AND	\$530.38	\$530.38	4/1/2006
· ·			
SUPERVISION AND	\$203.57	\$203.57	4/1/2006
	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITHOUT HEMODYNAMIC EVALUATION, HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL HEPATIC VENOGRAPHY, WEDGED OR FREE, WITHOUT HEMODYNAMIC EVALUATION, VENOUS SAMPLING THROUGH CATHETER, WITH OR WITHOUT ANGIOGRAPHY (EG, FOR TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD, RADIOLOGICAL SUPERVISION AND IN TRANSCATHETER THERAPY, INFUSION, ANY METHOD (EG, THROMBOLYSIS OTHER THAN ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER EXCHANGE OF A PREVIOUSLY PLACED INTRAVASCULAR CATHETER DURING THROMBOLYTIC THERA MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH) MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM PERCUTANEOUS PLACEMENT OF IVC FILTER, RADIOLOGICAL SUPERVISION AND INTRAVASCULAR ULTRASOUND (NON- CORONARY VESSEL), RADIOLOGICAL	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITHOUT HEMODYNAMIC EVALUATION, HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL HEPATIC VENOGRAPHY, WEDGED OR FREE, WITHOUT HEMODYNAMIC EVALUATION, VENOUS SAMPLING THROUGH CATHETER, WITH OR WITHOUT ANGIOGRAPHY (EG, FOR TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD, RADIOLOGICAL SUPERVISION AND IN TRANSCATHETER THERAPY, INFUSION, ANY METHOD (EG, THROMBOLYSIS OTHER THAN ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER EXCHANGE OF A PREVIOUSLY PLACED INTRAVASCULAR CATHETER DURING THROMBOLYTIC THERA MECHANICAL REMOVAL OF PERICATHETER OBSTRUCTIVE MATERIAL (EG, FIBRIN SHEATH) MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM PERCUTANEOUS PLACEMENT OF IVC FILTER, RADIOLOGICAL INTRAVASCULAR ULTRASOUND (NON- CORONARY VESSEL), RADIOLOGICAL	PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL PERCUTANEOUS TRANSHEPATIC PORTOGRAPHY WITHOUT HEMODYNAMIC EVALUATION, HEPATIC VENOGRAPHY, WEDGED OR FREE, WITHOUT HEMODYNAMIC EVALUATION, RADIOLOGICAL HEPATIC VENOGRAPHY, WEDGED OR FREE, WITH HEMODYNAMIC EVALUATION, RADIOLOGICAL HEPATIC VENOGRAPHY, WEDGED OR FREE, WITHOUT HEMODYNAMIC EVALUATION, RADIOLOGICAL HEPATIC VENOGRAPHY, WEDGED OR FREE, WITHOUT HEMODYNAMIC EVALUATION, VENOUS SAMPLING THROUGH CATHETER, WITH OR WITHOUT ANGIOGRAPHY (EG, FOR TRANSCATHETER THERAPY, EMBOLIZATION, ANY METHOD, RADIOLOGICAL SUPERVISION AND IN TRANSCATHETER THERAPY, INFUSION, ANY METHOD (EG, THROMBOLYSIS OTHER THAN ANGIOGRAPHY THROUGH EXISTING CATHETER FOR FOLLOW-UP STUDY FOR TRANSCATHETER EXCHANGE OF A PREVIOUSLY PLACED INTRAVASCULAR CATHETER DURING THROMBOLYTIC THERA MECHANICAL REMOVAL OF INTRALUMINAL (INTRACATHETER) OBSTRUCTIVE MATERIAL FROM PERCUTANEOUS PLACEMENT OF IVC FILTER, RADIOLOGICAL SUPERVISION AND S530.38 \$530.38 INTRAVASCULAR ULTRASOUND (NON- CORONARY VESSEL), RADIOLOGICAL



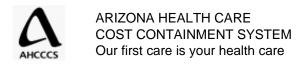
		NON FAC	E40 B4TE	
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
		2009	2009	
	INTRAVASCULAR ULTRASOUND (NON-			
	CORONARY VESSEL), RADIOLOGICAL			
75946	SUPERVISION AND	\$113.36	\$113.36	4/1/2006
	ENDOVASCULAR REPAIR OF			
75050	INFRARENAL ABDOMINAL AORTIC	#044.70	#044 7 0	4/4/0000
75952	ANEURYSM OR DISSECTION,	\$241.70	\$241.70	4/1/2006
	PLACEMENT OF PROXIMAL OR DISTAL EXTENSION PROSTHESIS FOR			
75953	ENDOVASCULAR REPAIR OF	\$101.93	\$101.93	4/1/2006
7 3 3 3 3	ENDOVASCULAR REPAIR OF ILIAC	Ψ101.93	ψ101.33	4/1/2000
	ARTERY ANEURYSM,			
	PSEUDOANEURYSM,			
75954	ARTERIOVENOUS	BR	BR	1/1/2003
	ENDOVASCULAR REPAIR OF			
	DESCENDING THORACIC AORTA (EG,			
75956	ANEURYSM, PSEUDOANEURYSM,	BR	BR	1/1/2006
	ENDOVASCULAR REPAIR OF			
75057	DESCENDING THORACIC AORTA (EG,	DD	DD.	1/1/2006
75957	ANEURYSM, PSEUDOANEURYSM, PLACEMENT OF PROXIMAL	BR	BR	1/1/2006
	EXTENSION PROSTHESIS FOR			
	ENDOVASCULAR REPAIR OF			
75958	DESCENDING	BR	BR	1/1/2006
	PLACEMENT OF DISTAL EXTENSION			
	PROSTHESIS(S) (DELAYED) AFTER			
75959	ENDOVASCULAR REPAIR	BR	BR	1/1/2006
	TRANSCATHETER INTRODUCTION OF			
75000	INTRAVASCULAR STENT(S), (EXCEPT	# 400.00	£400.00	40/4/0000
75960	CORONARY,	\$400.69	\$400.69	10/1/2008
	TRANSCATHETER RETRIEVAL, PERCUTANEOUS, OF			
	INTRAVASCULAR FOREIGN BODY			
75961	(EG,	\$490.21	\$490.21	10/1/2008
	()	ψ.σσ. <u>=</u> .	ψ.σσ. <u>=</u> .	10/1/2000
	TRANSLUMINAL BALLOON			
	ANGIOPLASTY, PERIPHERAL ARTERY,			
75962	RADIOLOGICAL SUPERVISION	\$422.19	\$422.19	10/1/2008
	TRANSLUMINAL BALLOON			
	ANGIOPLASTY, EACH ADDITIONAL			
75964	PERIPHERAL ARTERY,	\$237.14	\$237.14	10/1/2008



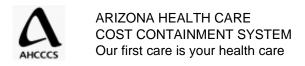
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	TRANSLUMINAL BALLOON			
	ANGIOPLASTY, RENAL OR OTHER			
75966	VISCERAL ARTERY, RADIOLOGICAL	\$467.54	\$467.54	10/1/2008
	TRANSLUMINAL BALLOON			
	ANGIOPLASTY, EACH ADDITIONAL			
75968	VISCERAL ARTERY, RADIOLOGICAL	\$237.93	\$237.93	10/1/2008
	TRANSCATHETER BIOPSY,			
	RADIOLOGICAL SUPERVISION AND			
75970	INTERPRETATION	\$502.88	\$502.88	4/1/2006
	TRANSLUMINAL BALLOON			
	ANGIOPLASTY, VENOUS (EG,			
75978	SUBCLAVIAN STENOSIS),	\$417.25	\$417.25	10/1/2008
	PERCUTANEOUS TRANSHEPATIC			
	BILIARY DRAINAGE WITH CONTRAST			
75980	MONITORING,	\$290.56	\$290.56	4/1/2006
			·	
	PERCUTANEOUS PLACEMENT OF			
	DRAINAGE CATHETER FOR			
75982	COMBINED INTERNAL AND EXTERNAL	\$316.13	\$316.13	4/1/2006
		·	·	
	CHANGE OF PERCUTANEOUS TUBE			
	OR DRAINAGE CATHETER WITH			
75984	CONTRAST MONITORING (EG, G	\$115.53	\$115.53	10/1/2008
	RADIOLOGICAL GUIDANCE (IE,	Ţc.c	4	
	FLUOROSCOPY, ULTRASOUND, OR			
75989	COMPUTED TOMOGRAPHY),	\$160.17	\$160.17	10/1/2008
	TRANSLUMINAL ATHERECTOMY,	ψ.σσ	ψσσ	. 6/ 1/2000
	PERIPHERAL ARTERY,			
	RADIOLOGICAL SUPERVISION AND			
75992	INTERP	\$656.06	\$656.06	4/1/2006
	TRANSLUMINAL ATHERECTOMY,	Ţ C C C C C	4 000100	
	EACH ADDITIONAL PERIPHERAL			
75993	ARTERY, RADIOLOGICAL	\$350.28	\$350.28	4/1/2006
	,	V	¥0000	
	TRANSLUMINAL ATHERECTOMY,			
	RENAL, RADIOLOGICAL SUPERVISION			
75994	AND INTERPRETATION	\$692.13	\$692.13	4/1/2006
. 500 1		ψ30 2 .10	Ψ302.10	., 1,2000
	TRANSLUMINAL ATHERECTOMY,			
	VISCERAL, RADIOLOGICAL			
75995	SUPERVISION AND INTERPRETATION	\$691.30	\$691.30	4/1/2006
. 5555	TRANSLUMINAL ATHERECTOMY,	Ψ001.00	ψ331.30	1/1/2000
	EACH ADDITIONAL VISCERAL			
75996	ARTERY, RADIOLOGICAL	\$349.72	\$349.72	4/1/2006
1 3330	MINIENT, NADIOLOGICAL	φ349.7Z	φ349.1Z	4/1/2000



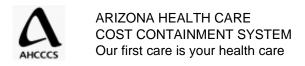
	blicable FARS/DFARS apply.	NON FAC	540 DATE	
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
11100	DEGGINI FIGH	2009	2009	EII BAIL
	FLUOROSCOPY (SEPARATE	2003		
	PROCEDURE), UP TO ONE HOUR			
76000	PHYSICIAN TIME, OTHER THAN	\$87.60	\$87.60	10/1/2008
7.0000	FLUOROSCOPY, PHYSICIAN TIME	φοιισσ	ψον.σσ	10/1/2000
	MORE THAN ONE HOUR, ASSISTING A			
76001	NON-RADIOLOGIC	\$140.23	\$140.23	4/1/2006
	RADIOLOGIC EXAMINATION FROM	·		
	NOSE TO RECTUM FOR FOREIGN			
76010	BODY, SINGLE VIEW, CHILD	\$28.79	\$28.79	10/1/2008
	RADIOLOGIC EXAMINATION,			
	ABSCESS, FISTULA OR SINUS TRACT			
76080	STUDY, RADIOLOGICAL	\$66.14	\$66.14	10/1/2008
	RADIOLOGICAL EXAMINATION,			
76098	SURGICAL SPECIMEN	\$21.50	\$21.50	10/1/2008
	RADIOLOGIC EXAMINATION, SINGLE			
	PLANE BODY SECTION (EG,			
76100	TOMOGRAPHY), OTHER THAN	\$102.86	\$102.86	10/1/2008
	RADIOLOGIC EXAMINATION,			
	COMPLEX MOTION (IE,			
	HYPERCYCLOIDAL) BODY SECTION	•		
76101	(EG,	\$159.43	\$159.43	10/1/2008
	RADIOLOGIC EXAMINATION,			
	COMPLEX MOTION (IE,			
70400	HYPERCYCLOIDAL) BODY SECTION	#400.04	¢400.04	40/4/0000
76102	(EG,	\$199.21	\$199.21	10/1/2008
	CINERADIOGRAPHY/VIDEORADIOGRAPHY, EXCEPT WHERE SPECIFICALLY			
76120	INCLUDED	\$74.42	\$74.42	10/1/2008
70120	CINERADIOGRAPHY/VIDEORADIOGRA	φ14.42	Ψ14.42	10/1/2006
	PHY TO COMPLEMENT ROUTINE			
76125	EXAMINATION (LIST	\$45.37	\$45.37	4/1/2006
70120	CONSULTATION ON X-RAY	ψ10.01	ψ10.01	17 172000
	EXAMINATION MADE ELSEWHERE,			
76140	WRITTEN REPORT	\$27.30	\$27.30	5/1/2004
76150	XERORADIOGRAPHY	\$21.77		10/1/2008
	SUBTRACTION IN CONJUNCTION		,	
76350	WITH CONTRAST STUDIES	\$16.38	\$16.38	5/1/2004
	3D RENDERING WITH			
	INTERPRETATION AND REPORTING			
	OF COMPUTED TOMOGRAPHY,			
76376	MAGNETIC	\$104.43	\$104.43	10/1/2008



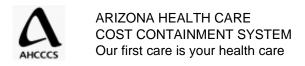
	NON FAC		
		FAC RATE	
DESCRIPTION	RATE	2009	EFF DATE
	2009	2000	
3D RENDERING WITH			
INTERPRETATION AND REPORTING			
OF COMPUTED TOMOGRAPHY.			
	\$138.95	\$138.95	10/1/2008
		V	
COMPUTED TOMOGRAPHY LIMITED			
	\$148 99	\$148 99	10/1/2008
	ψ1 10.00	ψ110.00	10/1/2000
	\$472.56	\$472.56	10/1/2008
	ψ+72.00	Ψ+7 2.00	10/1/2000
	DD	DD.	1/1/2003
•	DIX	DIX	1/1/2003
•	חח	DD	1/1/2002
,	DK	DK	1/1/2003
, ,	DD	55	4/4/0000
,	ВК	BK	1/1/2003
	D D		40/4/4000
RADIOGRAPHIC PROCEDURE	BR	BR	10/1/1982
·			
(GRAY SCALE) (FOR DETERM	\$98.07	\$98.07	10/1/2008
	\$154.56	\$154.56	10/1/2008
· ·			
	\$108.51	\$108.51	10/1/2008
WITHOUT SUPERIMPOSED	\$101.60	\$101.60	10/1/2008
OPHTHALMIC ULTRASOUND,			
DIAGNOSTIC; ANTERIOR SEGMENT			
ULTRASOUND, IMMERSION	\$91.05	\$91.05	10/1/2008
OPHTHALMIC ULTRASOUND,			
DIAGNOSTIC; CORNEAL			
PACHYMETRY, UNILATERAL OR			
BILATERAL	\$12.36	\$12.36	10/1/2008
		, , , ,	
	\$71.87	\$71.87	10/1/2008
	INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNETIC COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY MAGNETIC RESONANCE SPECTROSCOPY UNLISTED FLUOROSCOPIC PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED COMPUTED TOMOGRAPHY PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED MAGNETIC RESONANCE PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED DIAGNOSTIC RADIOGRAPHIC PROCEDURE ECHOENCEPHALOGRAPHY, REAL TIME WITH IMAGE DOCUMENTATION (GRAY SCALE) (FOR DETERM OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN AND QUANTITATIVE A-SCAN PERFORMED OPHTHALMIC ULTRASOUND, DIAGNOSTIC; QUANTITATIVE A-SCAN ONLY OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN (WITH OR WITHOUT SUPERIMPOSED OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION OPHTHALMIC ULTRASOUND, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL OR	SD RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNETIC \$138.95 COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY MAGNETIC RESONANCE SPECTROSCOPY \$472.56 UNLISTED FLUOROSCOPIC PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) BR UNLISTED COMPUTED TOMOGRAPHY PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) BR UNLISTED MAGNETIC RESONANCE PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) BR UNLISTED DIAGNOSTIC RADIOGRAPHIC PROCEDURE BR ECHOENCEPHALOGRAPHY, REAL TIME WITH IMAGE DOCUMENTATION (GRAY SCALE) (FOR DETERM \$98.07 OPHTHALMIC ULTRASOUND, DIAGNOSTIC; QUANTITATIVE A-SCAN ONLY \$108.51 OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN (WITH OR WITHOUT SUPERIMPOSED \$101.60 OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION \$91.05 OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION \$91.05 OPHTHALMIC ULTRASOUND, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL OR BILATERAL \$12.36 OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-	SD RENDERING WITH INTERPRETATION AND REPORTING OF COMPUTED TOMOGRAPHY, MAGNETIC COMPUTED TOMOGRAPHY, LIMITED OR LOCALIZED FOLLOW-UP STUDY MAGNETIC RESONANCE SPECTROSCOPY WILLISTED FLUOROSCOPIC PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED COMPUTED TOMOGRAPHY PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED MAGNETIC RESONANCE PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED MAGNETIC RESONANCE PROCEDURE (EG, DIAGNOSTIC, INTERVENTIONAL) UNLISTED DIAGNOSTIC RADIOGRAPHIC PROCEDURE BR BR ECHOENCEPHALOGRAPHY, REAL TIME WITH IMAGE DOCUMENTATION (GRAY SCALE) (FOR DETERM SP8.07 OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN AND QUANTITATIVE A-SCAN PERFORMED OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN (WITH OR WITHOUT SUPERIMPOSED OPHTHALMIC ULTRASOUND, DIAGNOSTIC; B-SCAN (WITH OR WITHOUT SUPERIMPOSED OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION OPHTHALMIC ULTRASOUND, DIAGNOSTIC; ANTERIOR SEGMENT ULTRASOUND, IMMERSION OPHTHALMIC ULTRASOUND, DIAGNOSTIC; CORNEAL PACHYMETRY, UNILATERAL OR BILATERAL OPHTHALMIC BIOMETRY BY ULTRASOUND ECHOGRAPHY, A-



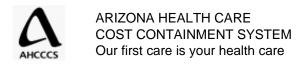
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	OPHTHALMIC BIOMETRY BY			
	ULTRASOUND ECHOGRAPHY, A-			
76519	SCAN; WITH INTRAOCULAR LENS	\$76.07	\$76.07	10/1/2008
	OPHTHALMIC ULTRASONIC FOREIGN	474.46	074.40	40/4/0000
76529	BODY LOCALIZATION	\$71.48	\$71.48	10/1/2008
	ULTRASOUND, SOFT TISSUES OF HEAD AND NECK (EG, THYROID,			
76536	PARATHYROID, PAROTID), R	\$104.74	\$104.74	10/1/2009
76536	ULTRASOUND, CHEST (INCLUDES	\$104.74	\$104.74	10/1/2008
	MEDIASTINUM), REAL TIME WITH			
76604	IMAGE DOCUMENTATION	\$85.64	\$85.64	10/1/2008
70004	INVICE DOCUMENTATION	ψ03.04	ψ05.04	10/1/2000
	ULTRASOUND, BREAST(S)			
	(UNILATERAL OR BILATERAL), REAL			
76645	TIME WITH IMAGE DOCUMENTAT	\$85.64	\$85.64	10/1/2008
	ULTRASOUND, ABDOMINAL, REAL	-		
	TIME WITH IMAGE DOCUMENTATION;			
76700	COMPLETE	\$133.97	\$133.97	10/1/2008
	ULTRASOUND, ABDOMINAL, B-SCAN			
	AND/OR REAL TIME WITH IMAGE			
76705	DOCUMENTATION;	\$100.15	\$100.15	10/1/2008
	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), REAL			
76770	TIME WITH IMAGE DOCU	\$128.95	\$128.95	10/1/2008
76775	ULTRASOUND, RETROPERITONEAL (EG, RENAL, AORTA, NODES), B-SCAN AND/OR REAL TIME	\$100.94		10/1/2008
	ULTRASOUND, TRANSPLANTED			
	KIDNEY, REAL TIME AND DUPLEX			
76776	DOPPLER WITH IMAGE DOCUMEN	\$139.66	\$139.66	10/1/2008
	ULTRASOUND, SPINAL CANAL AND			
76800	CONTENTS	\$121.65	\$121.65	10/1/2008
70004	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE	# 400 7 0	\$400.70	40/4/0000
76801	DOCUMENTATION, FETAL AND MATER	\$133.73	\$133.73	10/1/2008
	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE			
76902	DOCUMENTATION, FETAL AND	¢70.00	¢70.00	10/1/2000
76802	ULTRASOUND, PREGNANT UTERUS,	\$78.89	\$78.89	10/1/2008
	REAL TIME WITH IMAGE			
76805	DOCUMENTATION, FETAL AND	\$142.72	\$142.72	10/1/2008
10000	DOGGINLATION, FETAL AND	φ142.72	φ142.12	10/1/2008



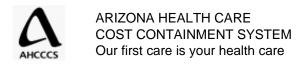
Reserved. Applicable FARS/DFARS apply.				
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
76810	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FETAL AND	\$101.41	\$101.41	10/1/2008
	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE			
76811	DOCUMENTATION, FETAL AND ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE	\$223.84	\$223.84	10/1/2008
76812	DOCUMENTATION, FETAL AND	\$159.15	\$159.15	10/1/2008
76813	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FIRST TRIMESTER	\$132.32	\$132.32	10/1/2008
76814	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FIRST TRIMESTER	\$85.09	\$85.09	10/1/2008
76815	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, LIMITED (EG,	\$92.19	\$92.19	10/1/2008
76816	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, FOLLOW-UP (EG,	\$100.78	\$100.78	10/1/2008
76817	ULTRASOUND, PREGNANT UTERUS, REAL TIME WITH IMAGE DOCUMENTATION, TRANSVAGINAL	\$99.21	\$99.21	10/1/2008
76818	FETAL BIOPHYSICAL PROFILE; WITH NON-STRESS TESTING	\$122.32	\$122.32	10/1/2008
76819	FETAL BIOPHYSICAL PROFILE; WITHOUT NON-STRESS TESTING DOPPLER VELOCIMETRY, FETAL;	\$98.78	\$98.78	10/1/2008
76820	UMBILICAL ARTERY DOPPLER VELOCIMETRY, FETAL;	\$67.91	\$67.91	10/1/2008
76821	MIDDLE CEREBRAL ARTERY ECHOCARDIOGRAPHY, FETAL,	\$101.72	\$101.72	10/1/2008
76825	CARDIOVASCULAR SYSTEM, REAL TIME WITH IMAGE ECHOCARDIOGRAPHY, FETAL,	\$180.42	\$180.42	10/1/2008
76826	CARDIOVASCULAR SYSTEM, REAL TIME WITH IMAGE	\$94.74	\$94.74	10/1/2008
76827	DOPPLER ECHOCARDIOGRAPHY, FETAL, PULSED WAVE AND/OR CONTINUOUS WAVE WITH	\$82.54	\$82.54	10/1/2008



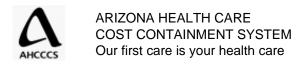
,,,	plicable FARS/DFARS apply.	NON FAC		
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
PROC	DESCRIPTION		2009	EFF DATE
	DODDI ED ECHOCADDIOCDADIIV	2009		
	DOPPLER ECHOCARDIOGRAPHY, FETAL, PULSED WAVE AND/OR			
76828	CONTINUOUS WAVE WITH	\$60.73	\$60.73	10/1/2008
76830	ULTRASOUND, TRANSVAGINAL	\$115.14		10/1/2008
70030	SALINE INFUSION	φ115.14	φ115.1 4	10/1/2006
	SONOHYSTEROGRAPHY (SIS),			
	INCLUDING COLOR FLOW DOPPLER,			
76831	WHEN	\$115.53	\$115.53	10/1/2008
70001	····	ψ110.00	ψ110.00	10/1/2000
	ULTRASOUND, PELVIC			
	(NONOBSTETRIC), REAL TIME WITH			
76856	IMAGE DOCUMENTATION; COMPLETE	\$115.53	\$115.53	10/1/2008
7 0000	ULTRASOUND, PELVIC	ψ.10.00	ψ110.00	10/1/2000
	(NONOBSTETRIC), B-SCAN AND/OR			
76857	REAL TIME WITH IMAGE	\$87.05	\$87.05	10/1/2008
	ULTRASOUND, SCROTUM AND			
76870	CONTENTS	\$113.96	\$113.96	10/1/2008
76872	ULTRASOUND, TRANSRECTAL;	\$129.61	\$129.61	10/1/2008
	ULTRASOUND, TRANSRECTAL;			
	PROSTATE VOLUME STUDY FOR			
76873	BRACHYTHERAPY TREATMENT	\$172.69	\$172.69	10/1/2008
	ULTRASOUND, EXTREMITY,			
	NONVASCULAR, REAL TIME WITH			
76880	IMAGE DOCUMENTATION	\$116.24	\$116.24	10/1/2008
	ULTRASOUND, INFANT HIPS, REAL			
	TIME WITH IMAGING			
76885	DOCUMENTATION; DYNAMIC	\$96.86	\$96.86	10/1/2008
	ULTRASOUND, INFANT HIPS, REAL			
	TIME WITH IMAGING			
76886	DOCUMENTATION; LIMITED, STATIC	\$91.80	\$91.80	10/1/2008
	ULTRASONIC GUIDANCE FOR			
	PERICARDIOCENTESIS, IMAGING			
76930	SUPERVISION AND INTERPRETATI	\$100.98	\$100.98	10/1/2008
	ULTRASONIC GUIDANCE FOR			
70000	ENDOMYOCARDIAL BIOPSY, IMAGING	# 00 7 0	000.70	4/4/0000
76932	SUPERVISION AND	\$96.79	\$96.79	4/1/2006
	ULTRASOUND GUIDED			
76026	COMPRESSION REPAIR OF ARTERIAL	# 220_42	¢000.40	10/4/0000
76936	PSEUDOANEURYSM OR	\$336.43	\$336.43	10/1/2008
	ULTRASOUND GUIDANCE FOR			
76027	VASCULAR ACCESS REQUIRING	¢26.04	¢26.04	10/1/2009
76937	ULTRASOUND EVALUATION OF	\$36.01	\$36.01	10/1/2008



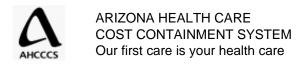
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
76940	ULTRASOUND GUIDANCE FOR, AND MONITORING OF, PARENCHYMAL TISSUE ABLATION	\$181.68	\$181.68	4/1/2006
		ψ.σσσ	ψ.σσσ	., .,
	ULTRASONIC GUIDANCE FOR			
	INTRAUTERINE FETAL TRANSFUSION			
76941	OR CORDOCENTESIS,	\$132.05	\$132.05	4/1/2006
	ULTRASONIC GUIDANCE FOR			
70040	NEEDLE PLACEMENT (EG, BIOPSY,	Φ477 47	Φ4 77 47	40/4/0000
76942	ASPIRATION, INJECTION, ULTRASONIC GUIDANCE FOR	\$177.47	\$177.47	10/1/2008
	CHORIONIC VILLUS SAMPLING,			
76945	IMAGING SUPERVISION AND	\$95.64	\$95.64	4/1/2006
7 00 10		φσσ.σ.:	φοσ.σ τ	1, 1,2000
	ULTRASONIC GUIDANCE FOR			
	AMNIOCENTESIS, IMAGING			
76946	SUPERVISION AND INTERPRETATION	\$57.51	\$57.51	10/1/2008
	ULTRASONIC GUIDANCE FOR			
	PLACEMENT OF RADIATION THERAPY	_		
76950	FIELDS	\$75.32	\$75.32	10/1/2008
	ULTRASONIC GUIDANCE FOR			
76965	INTERSTITIAL RADIOELEMENT APPLICATION	\$197.56	\$197.56	10/1/2008
70903	ULTRASOUND STUDY FOLLOW-UP	\$197.50	\$197.50	10/1/2008
76970	(SPECIFY)	\$77.09	\$77.09	10/1/2008
	GASTROINTESTINAL ENDOSCOPIC	ψσ	VIII.00	. 0, .,_000
	ULTRASOUND, SUPERVISION AND			
76975	INTERPRETATION	\$104.04	\$104.04	4/1/2006
	ULTRASOUND BONE DENSITY			
	MEASUREMENT AND			
70077	INTERPRETATION, PERIPHERAL	#00.40	COO 40	40/4/0000
76977	SITE(S), ANY ULTRASONIC GUIDANCE,	\$22.13	\$22.13	10/1/2008
76998	INTRAOPERATIVE	\$170.33	\$170.33	1/1/2007
70990	UNLISTED ULTRASOUND	\$170.33	\$170.33	1/1/2007
	PROCEDURE (EG, DIAGNOSTIC,			
76999	INTERVENTIONAL)	BR	BR	10/1/1982
	FLUOROSCOPIC GUIDANCE FOR			
	CENTRAL VENOUS ACCESS DEVICE			
77001	PLACEMENT, REPLACEMENT (C	\$96.54	\$96.54	10/1/2008
	FLUOROSCOPIC GUIDANCE FOR			
77000	NEEDLE PLACEMENT (EG, BIOPSY,	670 7-	070 77	40/4/0000
77002	ASPIRATION, INJECTION, L	\$73.75	\$73.75	10/1/2008



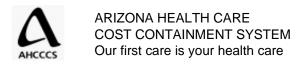
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	FLUOROSCOPIC GUIDANCE AND LOCALIZATION OF NEEDLE OR			
77003	CATHETER TIP FOR SPINE OR PA COMPUTED TOMOGRAPHY	\$66.93	\$66.93	10/1/2008
77011	GUIDANCE FOR STEREOTACTIC LOCALIZATION	\$612.69	\$612.69	10/1/2008
	COMPUTED TOMOGRAPHY GUIDANCE FOR NEEDLE PLACEMENT			
77012	(EG, BIOPSY, ASPIRATION, INJEC	\$267.27	\$267.27	10/1/2008
77040	COMPUTERIZED TOMOGRAPHY GUIDANCE FOR, AND MONITORING OF, PARENCHYMAL TISSUE ABLA	Ф Г .77.00	Ф Г 77 00	4 /4 /2007
77013	COMPUTED TOMOGRAPHY	\$577.80	\$577.80	1/1/2007
77014	GUIDANCE FOR PLACEMENT OF RADIATION THERAPY FIELDS	\$184.42	\$184.42	10/1/2008
77021	MAGNETIC RESONANCE GUIDANCE FOR NEEDLE PLACEMENT (EG, FOR BIOPSY, NEEDLE ASPIRAT	\$484.92	\$484.92	10/1/2008
	MAGNETIC RESONANCE GUIDANCE FOR, AND MONITORING OF,			
77022	PARENCHYMAL TISSUE ABLATION STEREOTACTIC LOCALIZATION	\$708.08	\$708.08	1/1/2007
77031	GUIDANCE FOR BREAST BIOPSY OR NEEDLE PLACEMENT (EG, FO	\$254.64	\$254.64	10/1/2008
77032	MAMMOGRAPHIC GUIDANCE FOR NEEDLE PLACEMENT, BREAST (EG, FOR WIRE LOCALIZATION OR	\$67.28	\$67.28	10/1/2008
77051	COMPUTER-AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS OF DIGITAL IMAGE DATA FOR	\$14.95	\$14.95	10/1/2008
	COMPUTER-AIDED DETECTION (COMPUTER ALGORITHM ANALYSIS	·	·	
77052	OF DIGITAL IMAGE DATA FOR MAMMARY DUCTOGRAM OR GALACTOGRAM, SINGLE DUCT, RADIOLOGICAL SUPERVISION AND	\$14.95	\$14.95	10/1/2008
77053	INTE	\$94.54	\$94.54	10/1/2008
77054	MAMMARY DUCTOGRAM OR GALACTOGRAM, MULTIPLE DUCTS, RADIOLOGICAL SUPERVISION AND I	¢420.20	¢420.20	40/4/2002
77054	INADIOLOGICAL SUPERVISION AND I	\$128.20	\$128.20	10/1/2008



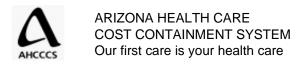
		NON FAC	- 1 0 D 1 T =	
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
	22001 11011	2009	2009	
77055	MAMMOGRAPHY; UNILATERAL	\$83.48	\$83.48	10/1/2008
77056	MAMMOGRAPHY; BILATERAL	\$105.37	\$105.37	10/1/2008
	SCREENING MAMMOGRAPHY,	•		
	BILATERAL (2-VIEW FILM STUDY OF			
77057	EACH BREAST)	\$83.83	\$83.83	10/1/2008
	MAGNETIC RESONANCE IMAGING,			
	BREAST, WITHOUT AND/OR WITH			
77058	CONTRAST MATERIAL(S); UN	\$854.38	\$854.38	10/1/2008
	MAGNETIC RESONANCE IMAGING,			
	BREAST, WITHOUT AND/OR WITH			
77059	CONTRAST MATERIAL(S); BI	\$985.09	\$985.09	10/1/2008
	MANUAL APPLICATION OF STRESS			
	PERFORMED BY PHYSICIAN FOR			
77071	JOINT RADIOGRAPHY, INCLU	\$34.68	\$34.68	10/1/2008
77072	BONE AGE STUDIES	\$23.85	\$23.85	10/1/2008
	BONE LENGTH STUDIES			
	(ORTHOROENTGENOGRAM,			
77073	SCANOGRAM)	\$41.47	\$41.47	10/1/2008
	RADIOLOGIC EXAMINATION,			
	OSSEOUS SURVEY; LIMITED (EG, FOR			
77074	METASTASES)	\$68.34	\$68.34	10/1/2008
	RADIOLOGIC EXAMINATION,			
	OSSEOUS SURVEY; COMPLETE			
77075	(AXIAL AND APPENDICULAR SKELETO	\$97.49	\$97.49	10/1/2008
	RADIOLOGIC EXAMINATION,			
77076	OSSEOUS SURVEY, INFANT	\$78.54	\$78.54	10/1/2008
	JOINT SURVEY, SINGLE VIEW, 2 OR			
77077	MORE JOINTS (SPECIFY)	\$49.12	\$49.12	10/1/2008
	COMPUTED TOMOGRAPHY, BONE			
	MINERAL DENSITY STUDY, 1 OR			
77078	MORE SITES; AXIAL SKELETON	\$84.97	\$84.97	10/1/2008
	COMPUTED TOMOGRAPHY, BONE			
	MINERAL DENSITY STUDY, 1 OR			
77079	MORE SITES; APPENDICULAR S	\$83.09	\$83.09	10/1/2008
	DUAL-ENERGY X-RAY			
	ABSORPTIOMETRY (DXA), BONE			
==000	DENSITY STUDY, 1 OR MORE SITES;	***	000.04	40/4/0000
77080	AXI	\$99.21	\$99.21	10/1/2008
	DUAL-ENERGY X-RAY			
	ABSORPTIOMETRY (DXA), BONE			
	DENSITY STUDY, 1 OR MORE SITES;	** • • • •	05.5-	40///00===
77081	APP	\$34.52	\$34.52	10/1/2008



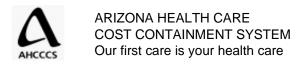
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	DUAL-ENERGY X-RAY ABSORPTIOMETRY (DXA), BONE DENSITY STUDY, 1 OR MORE SITES;			
77082	VER	\$33.35	\$33.35	10/1/2008
77083	RADIOGRAPHIC ABSORPTIOMETRY (EG, PHOTODENSITOMETRY, RADIOGRAMMETRY), 1 OR MORE S	\$31.82	\$31.82	10/1/2008
77094	MAGNETIC RESONANCE (EG, PROTON) IMAGING, BONE MARROW BLOOD SUPPLY	\$290 G7		
77084	THERAPEUTIC RADIOLOGY	\$389.67	\$389.67	10/1/2008
77261	TREATMENT PLANNING; SIMPLE THERAPEUTIC RADIOLOGY	\$69.16	\$69.16	10/1/2008
77262	TREATMENT PLANNING; INTERMEDIATE	\$104.55	\$104.55	10/1/2008
	THERAPEUTIC RADIOLOGY			
77263	TREATMENT PLANNING; COMPLEX THERAPEUTIC RADIOLOGY	\$155.47	\$155.47	10/1/2008
77280	SIMULATION-AIDED FIELD SETTING; SIMPLE	\$188.07	\$188.07	10/1/2008
77005	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING;	# 045.50	0045 50	40/4/0000
77285	INTERMEDIATE THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING;	\$315.52	\$315.52	10/1/2008
77290	COMPLEX	\$460.44	\$460.44	10/1/2008
77295	THERAPEUTIC RADIOLOGY SIMULATION-AIDED FIELD SETTING; THREE-DIMENSIONAL	\$925.43	\$925.43	10/1/2008
77299	UNLISTED PROCEDURE, THERAPEUTIC RADIOLOGY CLINICAL TREATMENT PLANNING	BR	BR	10/1/1982
11299	BASIC RADIATION DOSIMETRY CALCULATION, CENTRAL AXIS DEPTH	DK	DK	
77300	DOSE CALCULATION, TDF, INTENSITY MODULATED	\$77.28	\$77.28	10/1/2008
77301	RADIOTHERAPY PLAN, INCLUDING DOSE-VOLUME HISTOGRAMS FOR	\$2,027.78	\$2,027.78	10/1/2008
77305	TELETHERAPY, ISODOSE PLAN (WHETHER HAND OR COMPUTER CALCULATED); SIMPLE (ONE OR	\$87.21	\$87.21	10/1/2008
77310	TELETHERAPY, ISODOSE PLAN (WHETHER HAND OR COMPUTER CALCULATED); INTERMEDIATE	\$117.65	\$117.65	10/1/2008



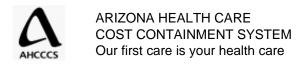
. 100011041 1.101	olicable FARS/DFARS apply.	NON EAC		
5500	DESCRIPTION	NON FAC	FAC RATE	DATE
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2000	
	TELETHERAPY, ISODOSE PLAN			
	(WHETHER HAND OR COMPUTER			
77315	CALCULATED); COMPLEX	\$162.02	\$162.02	10/1/2008
	SPECIAL TELETHERAPY PORT PLAN,			
77321	PARTICLES, HEMIBODY, TOTAL BODY	\$154.56	\$154.56	10/1/2008
	BRACHYTHERAPY ISODOSE PLAN;			
	SIMPLE (CALCULATION MADE FROM			
77326	SINGLE PLANE, ONE TO	\$146.64	\$146.64	10/1/2008
	BRACHYTHERAPY ISODOSE PLAN;			
	INTERMEDIATE (MULTIPLANE			
77327	DOSAGE CALCULATIONS,	\$210.43	\$210.43	10/1/2008
	BRACHYTHERAPY ISODOSE PLAN;			
	COMPLEX (MULTIPLANE ISODOSE			
77328	PLAN, VOLUME IMPLANT	\$293.48	\$293.48	10/1/2008
	SPECIAL DOSIMETRY (EG, TLD,			
	MICRODOSIMETRY) (SPECIFY), ONLY			
77331	WHEN PRESCRIBED BY	\$62.61	\$62.61	10/1/2008
	TREATMENT DEVICES, DESIGN AND			
	CONSTRUCTION; SIMPLE (SIMPLE			
77332	BLOCK, SIMPLE BOLUS)	\$81.01	\$81.01	10/1/2008
	TREATMENT DEVICES, DESIGN AND			
	CONSTRUCTION; INTERMEDIATE			
77333	(MULTIPLE BLOCKS,	\$85.80	\$85.80	10/1/2008
	TREATMENT DEVICES, DESIGN AND			
	CONSTRUCTION; COMPLEX			
77334	(IRREGULAR BLOCKS, SPECIAL	\$172.85	\$172.85	10/1/2008
	CONTINUING MEDICAL PHYSICS			
	CONSULTATION, INCLUDING			
77336	ASSESSMENT OF TREATMENT	\$84.66	\$84.66	10/1/2008
	SPECIAL MEDICAL RADIATION			
77370	PHYSICS CONSULTATION	\$131.69	\$131.69	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	STEREOTACTIC RADIOSURGERY			
77371	(SRS), COMPLETE COURSE O	\$1,156.45	\$1,156.45	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	STEREOTACTIC RADIOSURGERY			
77372	(SRS), COMPLETE COURSE O	\$878.00	\$878.00	10/1/2008
	STEREOTACTIC BODY RADIATION			
	THERAPY, TREATMENT DELIVERY,			
77373	PER FRACTION TO 1 OR MO	\$1,636.86	\$1,636.86	10/1/2008



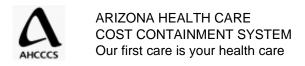
Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	UNLISTED PROCEDURE, MEDICAL			
	RADIATION PHYSICS, DOSIMETRY			
77399	AND TREATMENT DEVICES,	BR	BR	10/1/1982
	RADIATION TREATMENT DELIVERY,			
	SUPERFICIAL AND/OR ORTHO			
77401	VOLTAGE	\$46.88	\$46.88	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	SINGLE TREATMENT AREA, SINGLE			
77402	PORT OR PARALLEL	\$121.06	\$121.06	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	SINGLE TREATMENT AREA, SINGLE			
77403	PORT OR PARALLEL	\$110.00	\$110.00	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	SINGLE TREATMENT AREA, SINGLE			
77404	PORT OR PARALLEL	\$118.39	\$118.39	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	TWO SEPARATE TREATMENT AREAS,			
77407	THREE OR MORE PORTS	\$155.11	\$155.11	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	TWO SEPARATE TREATMENT AREAS,			
77408	THREE OR MORE PORTS	\$143.62	\$143.62	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	TWO SEPARATE TREATMENT AREAS,			
77409	THREE OR MORE PORTS	\$154.72	\$154.72	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	TWO SEPARATE TREATMENT AREAS,			
77411	THREE OR MORE PORTS	\$154.33	\$154.33	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	THREE OR MORE SEPARATE			
77412	TREATMENT AREAS, CUSTOM BLO	\$179.20	\$179.20	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	THREE OR MORE SEPARATE			
77413	TREATMENT AREAS, CUSTOM	\$180.73	\$180.73	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	THREE OR MORE SEPARATE			
77414	TREATMENT AREAS, CUSTOM	\$197.17	\$197.17	10/1/2008
	RADIATION TREATMENT DELIVERY,			
	THREE OR MORE SEPARATE			
77416	TREATMENT AREAS, CUSTOM	\$197.17	\$197.17	10/1/2008
	THERAPEUTIC RADIOLOGY PORT			
77417	FILM(S)	\$19.81	\$19.81	10/1/2008
	INTENSITY MODULATED TREATMENT			
	DELIVERY, SINGLE OR MULTIPLE			
77418	FIELDS/ARCS, VIA	\$601.47	\$601.47	10/1/2008



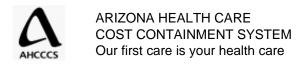
110001104. 7107	olicable FARS/DFARS apply.	NON EAC		
5500	DECODIBITION	NON FAC	FAC RATE	EEE DATE
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2000	
	STEREOSCOPIC X-RAY GUIDANCE			
	FOR LOCALIZATION OF TARGET			
77421	VOLUME FOR THE DELIVERY O	\$129.81	\$129.81	10/1/2008
	HIGH ENERGY NEUTRON RADIATION			
	TREATMENT DELIVERY; SINGLE			
77422	TREATMENT AREA USING A	\$139.78	\$139.78	10/1/2008
77 122		φ100.70	ψ100.70	10/1/2000
	HIGH ENERGY NEUTRON RADIATION			
	TREATMENT DELIVERY; 1 OR MORE			
77.400		# 400.00	# 400.00	40/4/0000
77423	ISOCENTER(S) WITH CO	\$190.66	\$190.66	10/1/2008
	RADIATION TREATMENT			
77427	MANAGEMENT, FIVE TREATMENTS	\$180.81	\$180.81	10/1/2008
	RADIATION THERAPY MANAGEMENT			
	WITH COMPLETE COURSE OF			
77431	THERAPY CONSISTING OF ONE	\$93.60	\$93.60	10/1/2008
	STEREOTACTIC RADIATION			
	TREATMENT MANAGEMENT OF			
	CRANIAL LESION(S) (COMPLETE			
77432	COURS	\$393.67	\$393.67	10/1/2008
	STEREOTACTIC BODY RADIATION	φοσοισ.	ψοσοίσ:	. 0, ., _ 0 0
	THERAPY, TREATMENT			
	MANAGEMENT, PER TREATMENT			
77435	COURSE,	\$655.84	\$655.84	10/1/2008
77435	COURSE,	\$000.64	\$000.64	10/1/2006
	SPECIAL TREATMENT PROCEDURE			
	(EG, TOTAL BODY IRRADIATION,			
77470	HEMIBODY RADIATION,	\$361.03	\$361.03	10/1/2008
	UNLISTED PROCEDURE,			
	THERAPEUTIC RADIOLOGY			
77499	TREATMENT MANAGEMENT	BR	BR	10/1/1982
	PROTON TREATMENT DELIVERY;			
77520	SIMPLE, WITHOUT COMPENSATION	BR	BR	1/1/2000
	PROTON TREATMENT DELIVERY;			
77522	SIMPLE, WITH COMPENSATION	BR	BR	1/1/2001
_	PROTON TREATMENT DELIVERY;			
77523	INTERMEDIATE	BR	BR	1/1/2000
	PROTON TREATMENT DELIVERY;	511	511	., ., 2000
77525	COMPLEX	BR	BR	1/1/2001
11020	HYPERTHERMIA, EXTERNALLY	DIX	DIV	1/1/2001
	•			
77000	GENERATED; SUPERFICIAL (IE,	#ccc 17	#ccc 4=	40/4/0000
77600	HEATING TO A DEPTH OF 4 CM	\$326.47	\$326.47	10/1/2008



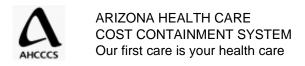
	blicable FARS/DFARS apply.	NON FAC		
PROC	DESCRIPTION	RATE	FAC RATE	EFF DATE
PROC	DESCRIPTION	2009	2009	EFF DATE
	HYPERTHERMIA, EXTERNALLY	2009		
	GENERATED; DEEP (IE, HEATING TO			
77605	DEPTHS GREATER THAN 4	\$529.83	\$529.83	10/1/2008
77005	HYPERTHERMIA GENERATED BY	ψ329.03	ψ029.00	10/1/2000
	INTERSTITIAL PROBE(S); 5 OR FEWER			
77610	INTERSTITIAL INTERSTITIAL	\$473.74	\$473.74	10/1/2008
77010	HYPERTHERMIA GENERATED BY	ψ+13.1+	ψ+10.1+	10/1/2000
	INTERSTITIAL PROBE(S); MORE THAN			
77615	5 INTERSTITIAL	\$670.28	\$670.28	10/1/2008
77010	HYPERTHERMIA GENERATED BY	ψ010.20	ψ070.20	10/1/2000
77620	INTRACAVITARY PROBE(S)	\$336.24	\$336.24	10/1/2008
77020	iiviiivieriviirii iivebb(e)	ψ550.24	Ψ550.2-	10/1/2000
	INFUSION OR INSTILLATION OF			
	RADIOELEMENT SOLUTION			
77750	(INCLUDES THREE MONTHS FOLLOW-	\$325.06	\$325.06	10/1/2008
77700	INTRACAVITARY RADIATION SOURCE	Ψ020.00	ψ020.00	10/1/2000
77761	APPLICATION; SIMPLE	\$334.04	\$334.04	10/1/2008
77701	7.1. P. LIGATTOTT, CHAIL EL	φοσ 1.0 1	φοσ 1.0 1	10/1/2000
	INTRACAVITARY RADIATION SOURCE			
77762	APPLICATION; INTERMEDIATE	\$465.89	\$465.89	10/1/2008
77702	INTRACAVITARY RADIATION SOURCE	ψ 100.00	ψ100.00	10/1/2000
77763	APPLICATION; COMPLEX	\$657.41	\$657.41	10/1/2008
	INTERSTITIAL RADIATION SOURCE	φσσπι	Ψσσ	. 07 172000
77776	APPLICATION; SIMPLE	\$384.88	\$384.88	10/1/2008
	INTERSTITIAL RADIATION SOURCE	-	70000	
77777	APPLICATION; INTERMEDIATE	\$558.98	\$558.98	10/1/2008
	INTERSTITIAL RADIATION SOURCE	-	Ţ J J J J J J J J J J J J J J J J J J J	701.17
77778	APPLICATION; COMPLEX	\$801.70	\$801.70	10/1/2008
-	·	*	,	
	Remote afterloading high dose rate			
77785	radionuclide brachytherapy; 1 channel	\$191.78	\$191.78	1/1/2009
	Remote afterloading high dose rate	·	·	
	radionuclide brachytherapy; 2 - 12			
77786	channels	\$578.89	\$578.89	1/1/2009
	Remote afterloading high dose rate			
	radionuclide brachytherapy; over 12			
77787	channels	\$860.33	\$860.33	1/1/2009
	SURFACE APPLICATION OF			
77789	RADIATION SOURCE	\$96.47	\$96.47	10/1/2008
	SUPERVISION, HANDLING, LOADING			
77790	OF RADIATION SOURCE	\$82.66	\$82.66	10/1/2008
	UNLISTED PROCEDURE, CLINICAL			
77799	BRACHYTHERAPY	BR	BR	10/1/1982



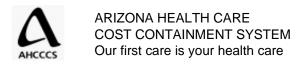
Reserved. App	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
78000	THYROID UPTAKE; SINGLE DETERMINATION	\$64.34	\$64.34	10/1/2008
78001	THYROID UPTAKE; MULTIPLE DETERMINATIONS	\$82.74	\$82.74	10/1/2008
78003	THYROID UPTAKE; STIMULATION, SUPPRESSION OR DISCHARGE (NOT INCLUDING INITIAL	\$71.32	\$71.32	10/1/2008
	THYROID IMAGING, WITH UPTAKE; SINGLE DETERMINATION			
78006	THYROID IMAGING, WITH UPTAKE;	\$189.91	\$189.91	10/1/2008
78007 78010	MULTIPLE DETERMINATIONS THYROID IMAGING; ONLY	\$134.05 \$135.54	\$134.05 \$135.54	10/1/2008 10/1/2008
78011	THYROID IMAGING; WITH VASCULAR FLOW	\$153.15	\$153.15	10/1/2008
70045	THYROID CARCINOMA METASTASES IMAGING; LIMITED AREA (EG, NECK AND CHEST ONLY)	¢405.44	\$185.44	10/1/2008
78015	THYROID CARCINOMA METASTASES IMAGING; WITH ADDITIONAL STUDIES (EG, URINARY	\$185.44		
78016 78018	THYROID CARCINOMA METASTASES IMAGING; WHOLE BODY	\$271.19 \$303.17	\$271.19 \$303.17	10/1/2008
78020	THYROID CARCINOMA METASTASES UPTAKE (LIST SEPARATELY IN ADDITION TO CODE FOR	\$90.15	\$90.15	10/1/2008
78070	PARATHYROID IMAGING ADRENAL IMAGING, CORTEX AND/OR	\$187.52	\$187.52	10/1/2008
78075	MEDULLA UNLISTED ENDOCRINE PROCEDURE,	\$368.09	\$368.09	10/1/2008
78099	DIAGNOSTIC NUCLEAR MEDICINE BONE MARROW IMAGING; LIMITED	BR	BR	10/1/1982
78102	AREA BONE MARROW IMAGING; MULTIPLE	\$146.76	\$146.76	10/1/2008
78103	AREAS BONE MARROW IMAGING; WHOLE	\$203.05	\$203.05	10/1/2008
78104	BODY PLASMA VOLUME,	\$238.99	\$238.99	10/1/2008
78110	RADIOPHARMACEUTICAL VOLUME- DILUTION TECHNIQUE (SEPARATE	\$69.67	\$69.67	10/1/2008



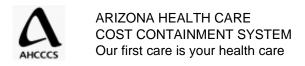
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2003	
	PLASMA VOLUME,			
70444	RADIOPHARMACEUTICAL VOLUME-	040474	040474	40/4/0000
78111	DILUTION TECHNIQUE (SEPARATE	\$104.74	\$104.74	10/1/2008
	RED CELL VOLUME DETERMINATION (SEPARATE PROCEDURE); SINGLE			
78120	SAMPLING	\$87.21	\$87.21	10/1/2008
70120	O/WII EIIVO	Ψ07.21	ψ07.21	10/1/2000
	RED CELL VOLUME DETERMINATION			
	(SEPARATE PROCEDURE); MULTIPLE			
78121	SAMPLINGS	\$116.71	\$116.71	10/1/2008
	WHOLE BLOOD VOLUME			
	DETERMINATION, INCLUDING			
	SEPARATE MEASUREMENT OF			
78122	PLASMA	\$159.51	\$159.51	10/1/2008
78130	RED CELL SURVIVAL STUDY;	\$152.88	\$152.88	10/1/2008
	RED CELL SURVIVAL STUDY; DIFFERENTIAL ORGAN/TISSUE			
78135	KINETICS, (EG, SPLENIC	\$295.79	\$295.79	10/1/2008
76133	LABELED RED CELL	Ψ293.79	\$295.79	10/1/2006
	SEQUESTRATION, DIFFERENTIAL			
	ORGAN/TISSUE, (EG, SPLENIC			
78140	AND/OR	\$165.39	\$165.39	10/1/2008
	SPLEEN IMAGING ONLY, WITH OR			
78185	WITHOUT VASCULAR FLOW	\$166.49	\$166.49	10/1/2008
	KINETICS, STUDY OF PLATELET			
	SURVIVAL, WITH OR WITHOUT			
78190	DIFFERENTIAL ORGAN/TISSUE	\$238.05		10/1/2008
78191	PLATELET SURVIVAL STUDY	\$247.38	\$247.38	10/1/2008
78195	LYMPHATICS AND LYMPH NODES IMAGING	\$303.56	\$303.56	10/1/2008
70195	UNLISTED HEMATOPOIETIC,	φ303.30	φ303.30	10/1/2008
	RETICULOENDOTHELIAL AND			
	LYMPHATIC PROCEDURE,			
78199	DIAGNOSTIC	BR	BR	10/1/1982
78201	LIVER IMAGING; STATIC ONLY	\$156.96	\$156.96	10/1/2008
	LIVER IMAGING; WITH VASCULAR			
78202	FLOW	\$184.18	\$184.18	10/1/2008
78205	LIVER IMAGING (SPECT);	\$255.58	\$255.58	10/1/2008
	LIVER IMAGING (SPECT); WITH			
78206	VASCULAR FLOW	\$322.66	\$322.66	10/1/2008
70215	LIVER AND SPLEEN IMAGING; STATIC ONLY	¢474.04	¢174 64	10/1/2002
78215	LIVER AND SPLEEN IMAGING; WITH	\$174.61	\$174.61	10/1/2008
78216	VASCULAR FLOW	\$151.66	\$151.66	10/1/2008
78216	VASCULAR FLUW	\$151.66	910.1c1¢	10/1/2008



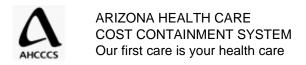
ποσοιν ο α. Αργ	plicable FARS/DFARS apply.	NON EAC		
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2009	
	LIVER FUNCTION STUDY WITH			
	HEPATOBILIARY AGENTS, WITH			
78220	SERIAL IMAGES	\$157.70	\$157.70	10/1/2008
	HEPATOBILIARY DUCTAL SYSTEM	·	·	
	IMAGING, INCLUDING GALLBLADDER,			
78223	WITH OR WITHOUT	\$275.78	\$275.78	10/1/2008
78230	SALIVARY GLAND IMAGING;	\$145.50	\$145.50	10/1/2008
70200	SALIVARY GLAND IMAGING; WITH	φ1 10.00	ψ1 10.00	10/1/2000
78231	SERIAL IMAGES	\$142.44	\$142.44	10/1/2008
70231	SERVIAE IIVIAGES	ψ142.44	Ψ142.44	10/1/2000
70000	SALIVARY GLAND FUNCTION STUDY	¢4.47.0E	¢4.47.25	10/1/2000
78232	ESOPHAGEAL MOTILITY	\$147.35	\$147.35	10/1/2008
78258		\$197.36	\$197.36	10/1/2008
78261	GASTRIC MUCOSA IMAGING	\$230.87	\$230.87	10/1/2008
	GASTROESOPHAGEAL REFLUX			
78262	STUDY	\$232.40	\$232.40	10/1/2008
78264	GASTRIC EMPTYING STUDY	\$257.35	\$257.35	10/1/2008
	UREA BREATH TEST, C-14			
	(ISOTOPIC); ACQUISITION FOR			
78267	ANALYSIS	\$10.98	\$10.98	5/1/2004
	UREA BREATH TEST, C-14			
78268	(ISOTOPIC); ANALYSIS	\$94.11	\$94.11	5/1/2004
	VITAMIN B-12 ABSORPTION STUDY			
	(EG, SCHILLING TEST); WITHOUT			
78270	INTRINSIC FACTOR	\$79.17	\$79.17	10/1/2008
. 02. 0	VITAMIN B-12 ABSORPTION STUDY	Ψ.σ	ψ. σ	. 0, ., _ 000
	(EG, SCHILLING TEST); WITH			
78271	INTRINSIC FACTOR	\$79.95	\$79.95	10/1/2008
70271	VITAMIN B-12 ABSORPTION STUDIES	Ψ19.93	Ψ19.93	10/1/2000
	COMBINED, WITH AND WITHOUT			
78272	INTRINSIC FACTOR	¢400.00	¢400.00	10/1/2000
10212	ACUTE GASTROINTESTINAL BLOOD	\$100.23	\$100.23	10/1/2008
70070		#000 7 0	#000 70	40/4/0000
78278	LOSS IMAGING	\$290.73	\$290.73	10/1/2008
78282	GASTROINTESTINAL PROTEIN LOSS	\$19.65	\$19.65	4/1/2006
	INTESTINE IMAGING (EG, ECTOPIC			
	GASTRIC MUCOSA, MECKEL'S			
78290	LOCALIZATION, VOLVULUS)	\$256.56	\$256.56	10/1/2008
	PERITONEAL-VENOUS SHUNT			
	PATENCY TEST (EG, FOR LEVEEN,			
78291	DENVER SHUNT)	\$219.61	\$219.61	10/1/2008
	UNLISTED GASTROINTESTINAL			
	PROCEDURE, DIAGNOSTIC NUCLEAR			
78299	MEDICINE	BR	BR	10/1/1982
. 5200				10/1/1002



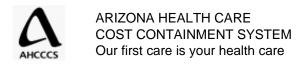
ilicable FARS/DFARS apply.	11011510		
		FAC RATE	
DESCRIPTION	RATE		EFF DATE
	2009	2009	
BONE AND/OR JOINT IMAGING:			
LIMITED AREA	\$160.17	\$160.17	10/1/2008
BONE AND/OR JOINT IMAGING:	*	, , ,	
	\$217.25	\$217.25	10/1/2008
	* =:::==	4 =111.	
· ·	\$242.83	\$242.83	10/1/2008
	ΨΞ :Ξ:σσ	Ψ= :=:00	
•	\$293.44	\$293.44	10/1/2008
	Ψ200.11	Ψ200.11	10/1/2000
	\$271.55	\$271.55	10/1/2008
	Ψ271.00	Ψ27 1.00	10/1/2000
	¢25.27	¢25.27	10/1/2008
	φου.21	ψ35.27	10/1/2000
· ·	DD	DD	10/1/1982
	DK	DK	10/1/1902
, , ,	#04.00	604.00	4/4/2000
			4/1/2006
	\$182.10	\$182.10	10/1/2008
	# 440.00	044000	40/4/0000
,	\$146.33	\$146.33	10/1/2008
	#050.04	* 050.04	40/4/0000
	\$250.21	\$250.21	10/1/2008
•	.	.	
· ·	\$177.87	\$177.87	10/1/2008
•			
·	\$209.60	\$209.60	10/1/2008
,			
` ''			
	BR	BR	1/1/1996
· ·			
	\$175.67	\$175.67	10/1/2008
MYOCARDIAL PERFUSION IMAGING;			
	\$229.73	\$229.73	10/1/2008
MYOCARDIAL PERFUSION IMAGING;			
TOMOGRAPHIC (SPECT), SINGLE			
STUDY (INCLUDING	\$307.44	\$307.44	10/1/2008
MYOCARDIAL PERFUSION IMAGING;			
STUDIES (INCLUDING	\$529.60	\$529.60	10/1/2008
	BONE AND/OR JOINT IMAGING; LIMITED AREA BONE AND/OR JOINT IMAGING; MULTIPLE AREAS BONE AND/OR JOINT IMAGING; WHOLE BODY BONE AND/OR JOINT IMAGING; THREE PHASE STUDY BONE AND/OR JOINT IMAGING; TOMOGRAPHIC (SPECT) BONE DENSITY (BONE MINERAL CONTENT) STUDY, ONE OR MORE SITES; SINGLE PHOTON UNLISTED MUSCULOSKELETAL PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE DETERMINATION OF CENTRAL C-V HEMODYNAMICS (NON-IMAGING) (EG, EJECTION FRACTION W CARDIAC SHUNT DETECTION NON-CARDIAC VASCULAR FLOW IMAGING (IE, ANGIOGRAPHY, VENOGRAPHY) ACUTE VENOUS THROMBOSIS IMAGING, PEPTIDE VENOUS THROMBOSIS IMAGING, VENOGRAM; UNILATERAL VENOUS THROMBOSIS IMAGING, VENOGRAM; BILATERAL MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION MYOCARDIAL PERFUSION IMAGING; (PLANAR) SINGLE STUDY, AT REST OR STRESS MYOCARDIAL PERFUSION IMAGING; MULTIPLE STUDIES, (PLANAR) AT REST AND/OR STRESS MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY (INCLUDING MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY (INCLUDING	BONE AND/OR JOINT IMAGING; LIMITED AREA \$160.17 BONE AND/OR JOINT IMAGING; MULTIPLE AREAS \$217.25 BONE AND/OR JOINT IMAGING; WHOLE BODY \$242.83 BONE AND/OR JOINT IMAGING; WHOLE BODY \$293.44 BONE AND/OR JOINT IMAGING; THREE PHASE STUDY \$293.44 BONE AND/OR JOINT IMAGING; TOMOGRAPHIC (SPECT) \$271.55 BONE DENSITY (BONE MINERAL CONTENT) STUDY, ONE OR MORE SITES; SINGLE PHOTON \$35.27 UNLISTED MUSCULOSKELETAL PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE BR DETERMINATION OF CENTRAL C-V HEMODYNAMICS (NON-IMAGING) (EG, EJECTION FRACTION W \$24.06 CARDIAC SHUNT DETECTION \$182.10 NON-CARDIAC VASCULAR FLOW IMAGING (IE, ANGIOGRAPHY, VENOGRAPHY) \$146.33 ACUTE VENOUS THROMBOSIS IMAGING, VENOGRAM; UNILATERAL \$177.87 VENOUS THROMBOSIS IMAGING, VENOGRAM; BILATERAL \$209.60 MYOCARDIAL IMAGING, POSITRON EMISSION TOMOGRAPHY (PET), METABOLIC EVALUATION BR MYOCARDIAL PERFUSION IMAGING; (PLANAR) SINGLE STUDY, AT REST OR STRESS \$175.67 MYOCARDIAL PERFUSION IMAGING; MULTIPLE STUDIES, (PLANAR) AT REST AND/OR STRESS \$229.73 MYOCARDIAL PERFUSION IMAGING; TOMOGRAPHIC (SPECT), SINGLE STUDY (INCLUDING \$307.44	DESCRIPTION



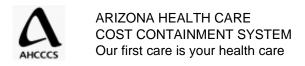
110001100111111111111111111111111111111	licable FARS/DFARS apply.	NONE		
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2009	
	MYOCARDIAL IMAGING, INFARCT			
	AVID, PLANAR; QUALITATIVE OR			
78466	QUANTITATIVE	\$172.45	\$172.45	10/1/2008
	MYOCARDIAL IMAGING, INFARCT			
	AVID, PLANAR, WITH EJECTION			
78468	FRACTION BY FIRST PASS	\$222.94	\$222.94	10/1/2008
	MYOCARDIAL IMAGING, INFARCT			
	AVID, PLANAR; TOMOGRAPHIC SPECT			
78469	WITH OR WITHOUT	\$269.59	\$269.59	10/1/2008
	CARDIAC BLOOD POOL IMAGING,	·	·	
	GATED EQUILIBRIUM; PLANAR,			
78472	SINGLE STUDY AT REST OR	\$273.43	\$273.43	10/1/2008
_	CARDIAC BLOOD POOL IMAGING,	*	,	
	GATED EQUILIBRIUM; MULTIPLE			
78473	STUDIES, WALL MOTION	\$384.57	\$384.57	10/1/2008
	MYOCARDIAL PERFUSION STUDY	V V V V V V V V V V	400.1101	
	WITH WALL MOTION, QUALITATIVE			
78478	OR QUANTITATIVE STUDY	\$71.40	\$71.40	10/1/2008
70110	MYOCARDIAL PERFUSION STUDY	Ψ	ψ,ο	10/1/2000
	WITH EJECTION FRACTION (LIST			
78480	SEPARATELY IN ADDITION	\$62.02	\$62.02	10/1/2008
	CARDIAC BLOOD POOL IMAGING,	ψο2.02	ψ0 <u>2.</u> 02	
	(PLANAR), FIRST PASS TECHNIQUE;			
78481	SINGLE STUDY, AT	\$248.99	\$248.99	10/1/2008
	CARDIAC BLOOD POOL IMAGING,	Ψ= :0:00	Ψ= 10.00	
	(PLANAR), FIRST PASS TECHNIQUE;			
78483	MULTIPLE STUDIES,	\$359.74	\$359.74	10/1/2008
7 0 100	MYOCARDIAL IMAGING, POSITRON	φοσοιι ι	φοσοιι ι	10/1/2000
	EMISSION TOMOGRAPHY (PET),			
78491	PERFUSION; SINGLE STUDY	BR	BR	1/1/1998
7 0 10 1	MYOCARDIAL IMAGING, POSITRON	- Bix	D. C.	17 17 1000
	EMISSION TOMOGRAPHY (PET),			
78492	PERFUSION; MULTIPLE	BR	BR	1/1/1998
70102	CARDIAC BLOOD POOL IMAGING,	- Bix	D. C.	17 17 1000
	GATED EQUILIBRIUM, SPECT, AT			
78494	REST, WALL MOTION	\$316.43	\$316.43	10/1/2008
70101	CARDIAC BLOOD POOL IMAGING,	φο το. το	φο το. το	10/1/2000
	GATED EQUILIBRIUM, SINGLE STUDY,			
78496	AT REST, WITH	\$184.30	\$184.30	10/1/2008
	UNLISTED CARDIOVASCULAR	Ţ.000	Ţ.000	. 5, 1,2500
	PROCEDURE, DIAGNOSTIC NUCLEAR			
78499	MEDICINE	BR	BR	10/1/1982
7 5 100	PULMONARY PERFUSION IMAGING;	DIX	BIX	10/1/1002
78580	PARTICULATE	\$201.88	\$201.88	10/1/2008
, 0000	174CHOOLATE	Ψ201.00	Ψ201.00	10/1/2000



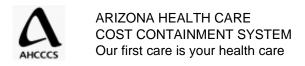
	olicable FARS/DFARS apply.	NIONI EAO		
		NON FAC	FAC RATE	
PROC	DESCRIPTION	RATE	2009	EFF DATE
		2009	2009	
	PULMONARY PERFUSION IMAGING,			
	PARTICULATE, WITH VENTILATION;			
78584	SINGLE BREATH	\$167.31	\$167.31	10/1/2008
	PULMONARY PERFUSION IMAGING,	* 101101	Ţ.G.I.G.I	707.77=000
	PARTICULATE, WITH VENTILATION;			
78585	REBREATHING AND	\$330.51	\$330.51	10/1/2009
70000	REBREATTING AND	φ33U.31	\$330.31	10/1/2008
	DULL MONADY VENITH ATION IMACING			
70500	PULMONARY VENTILATION IMAGING,	0454.40	0454.40	40/4/0000
78586	AEROSOL; SINGLE PROJECTION	\$151.19	\$151.19	10/1/2008
	PULMONARY VENTILATION IMAGING,			
	AEROSOL; MULTIPLE PROJECTIONS			
78587	(EG, ANTERIOR,	\$183.79	\$183.79	10/1/2008
	PULMONARY PERFUSION IMAGING,			
	PARTICULATE, WITH VENTILATION			
78588	IMAGING, AEROSOL,	\$279.82	\$279.82	10/1/2008
	PULMONARY VENTILATION IMAGING,			
	GASEOUS, SINGLE BREATH, SINGLE			
78591	PROJECTION	\$156.53	\$156.53	10/1/2008
70001	T REGEOTION	ψ100.00	ψ100.00	10/1/2000
	DUI MONARY VENTU ATION IMACING			
	PULMONARY VENTILATION IMAGING,			
70500	GASEOUS, WITH REBREATHING AND	# 405.04	# 405.04	40/4/0000
78593	WASHOUT WITH OR	\$185.24	\$185.24	10/1/2008
	PULMONARY VENTILATION IMAGING,			
	GASEOUS, WITH REBREATHING AND			
78594	WASHOUT WITH OR	\$228.39	\$228.39	10/1/2008
	PULMONARY QUANTITATIVE			
	DIFFERENTIAL FUNCTION			
78596	(VENTILATION/ PERFUSION) STUDY	\$368.80	\$368.80	10/1/2008
	UNLISTED RESPIRATORY			
	PROCEDURE, DIAGNOSTIC NUCLEAR			
78599	MEDICINE	BR	BR	10/1/1982
	BRAIN IMAGING, LESS THAN 4 STATIC			
78600	VIEWS;	\$163.08	\$163.08	10/1/2008
7000	1	ψ100.00	ψ100.00	10/1/2000
	BRAIN IMAGING, LESS THAN 4 STATIC			
78601	VIEWS; WITH VASCULAR FLOW	\$195.95	\$195.95	10/1/2008
70001		\$195.95	\$190.90	10/1/2006
70005	BRAIN IMAGING, MINIMUM 4 STATIC	#407.00	¢407.00	40/4/0000
78605	VIEWS;	\$187.20	\$187.20	10/1/2008
	BRAIN IMAGING, MINIMUM 4 STATIC			
78606	VIEWS; WITH VASCULAR FLOW	\$272.14	\$272.14	10/1/2008
	BRAIN IMAGING, TOMOGRAPHIC			
78607	(SPECT)	\$355.77	\$355.77	10/1/2008



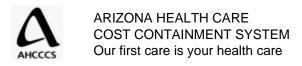
neserveu. App	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
70600	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); METABOLIC EVALUATION	BR	BR	1/1/1004
78608		DK	DK	1/1/1994
78609	BRAIN IMAGING, POSITRON EMISSION TOMOGRAPHY (PET); PERFUSION EVALUATION	\$72.73	\$72.73	10/1/2008
70003	BRAIN IMAGING, VASCULAR FLOW	Ψ12.13	Ψ12.13	10/1/2000
78610	ONLY	\$176.42	\$176.42	10/1/2008
78630	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$300.77	\$300.77	10/1/2008
78635	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$248.52	\$248.52	10/1/2008
	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING		·	
78645	INTRODUCTION OF MATERIAL);	\$233.93	\$233.93	10/1/2008
78647	CEREBROSPINAL FLUID FLOW, IMAGING (NOT INCLUDING INTRODUCTION OF MATERIAL);	\$326.12	\$326.12	10/1/2008
70047	CEREBROSPINAL FLUID LEAKAGE	ψ320.12	ψ320.12	10/1/2000
78650	DETECTION AND LOCALIZATION	\$287.75	\$287.75	10/1/2008
78660	RADIOPHARMACEUTICAL DACRYOCYSTOGRAPHY	\$149.03	\$149.03	10/1/2008
78699	UNLISTED NERVOUS SYSTEM PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
78700	KIDNEY IMAGING MORPHOLOGY;	\$167.63	\$167.63	10/1/2008
78701	KIDNEY IMAGING; WITH VASCULAR FLOW	\$198.62	\$198.62	10/1/2008
78707	KIDNEY IMAGING MORPHOLOGY; WITH VASCULAR FLOW AND FUNCTION, SINGLE STUDY WITHOUT	\$239.85	\$239.85	10/1/2008
10101	KIDNEY IMAGING MORPHOLOGY; WITH VASCULAR FLOW AND	Ψ200.00	Ψ200.00	16/1/2000
78708	FUNCTION, SINGLE STUDY, WITH P KIDNEY IMAGING MORPHOLOGY;	\$212.15	\$212.15	10/1/2008
78709	WITH VASCULAR FLOW AND FUNCTION, MULTIPLE STUDIES, WI	\$323.60	\$323.60	10/1/2008
78710	KIDNEY IMAGING MORPHOLOGY; TOMOGRAPHIC (SPECT)	\$253.62	\$253.62	10/1/2008
78725	KIDNEY FUNCTION STUDY, NON- IMAGING RADIOISOTOPIC STUDY	\$99.56	\$99.56	10/1/2008



Reserved. Ap	plicable FARS/DFARS apply.			
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
	URINARY BLADDER RESIDUAL STUDY			
	(LIST SEPARATELY IN ADDITION TO	_		
78730	CODE FOR PRIMARY	\$76.85	\$76.85	10/1/2008
	URETERAL REFLUX STUDY			
70740	(RADIOPHARMACEUTICAL VOIDING CYSTOGRAM)	¢477.06	¢177.06	10/1/2009
78740	TESTICULAR IMAGING WITH	\$177.36	\$177.36	10/1/2008
78761	VASCULAR FLOW	\$194.23	\$194.23	10/1/2008
70701	UNLISTED GENITOURINARY	ψ104.20	ψ154.25	10/1/2000
	PROCEDURE, DIAGNOSTIC NUCLEAR			
78799	MEDICINE	BR	BR	10/1/1982
	RADIOPHARMACEUTICAL			
	LOCALIZATION OF TUMOR OR			
	DISTRIBUTION OF			
78800	RADIOPHARMACEUTICAL	\$183.44	\$183.44	10/1/2008
	RADIOPHARMACEUTICAL			
	LOCALIZATION OF TUMOR OR			
78801	DISTRIBUTION OF	\$238.95	\$238.95	10/1/2008
	RADIOPHARMACEUTICAL			
	LOCALIZATION OF TUMOR OR			
78802	DISTRIBUTION OF	\$309.29	\$309.29	10/1/2008
	RADIOPHARMACEUTICAL			
70000	LOCALIZATION OF TUMOR OR	CO 40 40	CO 40 40	40/4/0000
78803	DISTRIBUTION OF	\$348.40	\$348.40	10/1/2008
	RADIOPHARMACEUTICAL LOCALIZATION OF TUMOR OR			
78804	DISTRIBUTION OF TOMOR OR	\$551.96	\$551.96	10/1/2008
70004	RADIOPHARMACEUTICAL	φ551.90	φ331.90	10/1/2008
	LOCALIZATION OF INFLAMMATORY			
78805	PROCESS; LIMITED AREA	\$183.52	\$183.52	10/1/2008
. 5555	RADIOPHARMACEUTICAL	ψ.σσ.σ <u>=</u>	ψ.σσ.σ <u>=</u>	
	LOCALIZATION OF INFLAMMATORY			
78806	PROCESS; WHOLE BODY	\$332.55	\$332.55	10/1/2008
	RADIOPHARMACEUTICAL			
	LOCALIZATION OF INFLAMMATORY			
78807	PROCESS; TOMOGRAPHIC (SPECT)	\$347.65	\$347.65	10/1/2008
	INJECTION PROCEDURE FOR			
	RADIOPHARMACEUTICAL			
	LOCALIZATION BY NON-IMAGING			
78808	PROBE ST	\$46.38	\$46.38	1/1/2009
	DOOLTDON ENGOGOL TONGOOD : TONGO			
	POSITRON EMISSION TOMOGRAPHY			
70011	(PET) IMAGING; LIMITED AREA (EG, CHEST, HEAD/NECK)	חח	D.D.	1/1/2005
78811	OHEST, FIEAD/NECK)	BR	BR	1/1/2005



Reserved. Applicable FARS/DFARS apply.				
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
78812	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; SKULL BASE TO MID- THIGH	BR	BR	1/1/2005
78813	POSITRON EMISSION TOMOGRAPHY (PET) IMAGING; WHOLE BODY	BR	BR	1/1/2005
78814	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPH	BR	BR	1/1/2005
78815	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPH	BR	BR	1/1/2005
78816	POSITRON EMISSION TOMOGRAPHY (PET) WITH CONCURRENTLY ACQUIRED COMPUTED TOMOGRAPH	BR	BR	1/1/2005
78999	UNLISTED MISCELLANEOUS PROCEDURE, DIAGNOSTIC NUCLEAR MEDICINE	BR	BR	10/1/1982
79005	RADIOPHARMACEUTICAL THERAPY, BY ORAL ADMINISTRATION	\$167.59	\$167.59	10/1/2008
79101	RADIOPHARMACEUTICAL THERAPY, BY INTRAVENOUS ADMINISTRATION	\$180.38	\$180.38	10/1/2008
79200	RADIOPHARMACEUTICAL THERAPY, BY INTRACAVITARY ADMINISTRATION	\$183.05	\$183.05	10/1/2008
79300	RADIOPHARMACEUTICAL THERAPY, BY INTERSTITIAL RADIOACTIVE COLLOID ADMINISTRATION	\$83.44	\$83.44	4/1/2006
79403	RADIOPHARMACEUTICAL THERAPY, RADIOLABELED MONOCLONAL ANTIBODY BY INTRAVENOUS	\$241.03	\$241.03	10/1/2008
79440	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTICULAR ADMINISTRATION	\$175.79	\$175.79	10/1/2008
79445	RADIOPHARMACEUTICAL THERAPY, BY INTRA-ARTERIAL PARTICULATE ADMINISTRATION	\$231.09	\$231.09	4/1/2006



Reserved. Applicable FARS/DFARS apply.				
PROC	DESCRIPTION	NON FAC RATE 2009	FAC RATE 2009	EFF DATE
79999	RADIOPHARMACEUTICAL THERAPY, UNLISTED PROCEDURE	BR	BR	10/1/1982
G0130	SINGLE ENERGY X-RAY ABSORPTIOMETRY (SEXA) BONE DENSITY STUDY, ONE OR MORE	\$37.19	\$37.19	10/1/2008
30130	LINEAR ACCELERATOR BASED STEREOTACTIC RADIOSURGERY,	φ31.19	φ31.19	10/1/2000
G0173	COMPLETE COURSE OF THERAPY SCREENING MAMMOGRAPHY,	BR	BR	1/1/2001
G0202	PRODUCING DIRECT DIGITAL IMAGE, BILATERAL, ALL VIEWS	\$134.71	\$134.71	10/1/2008
G0204	DIAGNOSTIC MAMMOGRAPHY, PRODUCING DIRECT DIGITAL IMAGE, BILATERAL, ALL VIEWS	\$152.45	\$152.45	10/1/2008
G0206	DIAGNOSTIC MAMMOGRAPHY, PRODUCING DIRECT DIGITAL IMAGE, UNILATERAL, ALL VIEWS	\$121.73	\$121.73	10/1/2008
G0219	PET IMAGING WHOLE BODY; MELANOMA FOR NON-COVERED INDICATIONS	\$2,045.29	\$2,045.29	5/1/2004
G0251	LINEAR ACCELERATOR BASED STEREOTACTIC RADIOSURGERY, DELIVERY INCLUDING	BR	BR	1/1/2003
G0339	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEREOTACTIC RADIOSURGERY,	BR	BR	1/1/2004
G0340	IMAGE-GUIDED ROBOTIC LINEAR ACCELERATOR-BASED STEROTACTIC RADIOSURGERY,	BR	BR	1/1/2004
Q0092	SET-UP PORTABLE X-RAY EQUIPMENT	\$15.65	\$15.65	10/1/2008
R0070	TRANSPORTATION OF PORTABLE X- RAY EQUIPMENT AND PERSONNEL TO HOME OR NURSING HOME	\$103.08	\$103.08	5/1/2004
R0075	TRANSPORTATION OF PORTABLE X- RAY EQUIPMENT AND PERSONNEL TO HOME OR NURSING	BR	BR	3/1/1989
R0076	TRANSPORTATION OF PORTABLE EKG TO FACILITY OR LOCATION, PER PATIENT	BR	BR	3/1/1989